| Fill in this information to identify your o | ase: | |
|---|---|------------------------------------|
| United States Bankruptcy Court for the: WESTERN DISTRICT OF TEXAS | | |
| Case number (if known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|-------|---|--|---|
| 1. Y | our full name | | |
| g | Vrite the name that is on your government-issued picture dentification (for example, your driver's license or | Kevin First Name | First Name |
| • | passport). | Middle Name | Middle Name |
| | , | Sterneckert | |
| ic | Bring your picture dentification to your meeting | Last Name | Last Name |
| ٧ | vith the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. AI | All other names you | | |
| - | nave used in the last 8 rears | First Name | First Name |
| | nclude your married or | Middle Name | Middle Name |
| n | naiden names. | Last Name | Last Name |
| 3. C | Only the last 4 digits of | | |
| | our Social Security | xxx - xx - <u>3</u> <u>1</u> <u>3</u> <u>7</u> | xxx - xx |
| - | number or federal ndividual Taxpayer | OR | OR |
| | dentification number | 9xx - xx - | 9xx - xx - |

(ITIN)

| Debtor 1 | | Kevin Sterneckert | | | | Case number (if known) | | | |
|----------|--------------------|---|-----------------|---|----------|---|--|--|--|
| | | | About Debtor 1: | | | About Debtor 2 (Spouse Only in a Joint Case): | | | |
| 4. | and Em | | | I have not used any business names or El | INs. | ☐ I have not used any business names or EINs. | | | |
| | (EIN) yo | dentification Numbers EIN) you have used in ne last 8 years | | iness name | _ | Business name | | | |
| Include | | trade names and | Bus | ness name | _ | Business name | | | |
| | | usiness as names | Bus | ness name | | Business name | | | |
| | | | EIN | | - | <u>EIN</u> | | | |
| | | | EIN | | _ | <u> </u> | | | |
| 5. | Where | you live | | | | If Debtor 2 lives at a different address: | | | |
| | | | | S20 Bridlewood Trail Aber Street | | Number Street | | | |
| | | | | | <u> </u> | | | | |
| | | | Во | erne TX 78006 | | | | | |
| | | | City | State ZIP Code | _ | City State ZIP Code | | | |
| | | | Ke Cou | ndall | _ | County | | | |
| | | | | | | • | | | |
| | | | the cou | our mailing address is different from one above, fill it in here. Note that the rt will send any notices to you at this ling address. | | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address. | | | |
| | | | Num | nber Street | _ | Number Street | | | |
| | | | P.0 | Вох | _ | P.O. Box | | | |
| | | | City | State ZIP Code | _ | City State ZIP Code | | | |
| 6. | | ou are choosing | Che | eck one: | | Check one: | | | |
| | this dis bankru | trict to file for ptcy | V | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | | |
| | | | | I have another reason. Explain. (See 28 U.S.C. § 1408.) | | I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| P | art 2: | Tell the Court Ab | out Y | our Bankruptcy Case | | | | | |
| 7. | | apter of the ptcy Code you | | k one: (For a brief description of each, see ankruptcy (Form 2010)). Also, go to the top | | te Required by 11 U.S.C. § 342(b) for Individuals Filing age 1 and check the appropriate box. | | | |
| | are cho under | osing to file | | Chapter 7 | | | | | |
| | | | | Chapter 11 | | | | | |
| | | | | Chapter 12 | | | | | |
| | | | N | Chapter 13 | | | | | |

| Deb | tor 1 Kevin Sterneckert | | Case number (if known) | | | | | |
|-----|---|------------|---|--|--|--|--|--|
| 8. | How you will pay the fee | Ci p | will pay the entire fee when I file my petition. Please check with the clerk's office in your local ourt for more details about how you may pay. Typically, if you are paying the fee yourself, you may ay with cash, cashier's check, or money order. If your attorney is submitting your payment on your ehalf, your attorney may pay with a credit card or check with a pre-printed address. | | | | | |
| | | | need to pay the fee in installments. If you choose this option, sign and attach the Application for advividuals to Pay The Filing Fee in Installments (Official Form 103A). | | | | | |
| | | B th | request that my fee be waived (You may request this option only if you are filing for Chapter 7. by law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the see in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 illing Fee Waived (Official Form 103B) and file it with your petition. | | | | | |
| 9. | Have you filed for | □ N | lo | | | | | |
| | bankruptcy within the last 8 years? | √ Y | es. | | | | | |
| | | Distric | Western District of Texas San Antoni When 07/31/2017 Case number 17-51838G | | | | | |
| | | Distric | Western District of Texas San Antoni When 01/01/2019 Case number 19-50008G | | | | | |
| | | Distric | t Western District of Texas San Antoni When 10/25/2019 Case number 19-52507G | | | | | |
| 10. | Are any bankruptcy | ☑ N | io | | | | | |
| | cases pending or being filed by a spouse who is | □ Y | es. | | | | | |
| | not filing this case with you, or by a business | Debtor | Relationship to you | | | | | |
| | partner, or by an | Distric | | | | | | |
| | affiliate? | | MM / DD / YYYY if known | | | | | |
| | | Debtor | Relationship to you | | | | | |
| | | Distric | | | | | | |
| | | | MM / DD / YYYY if known | | | | | |
| 11. | Do you rent your residence? | <u> </u> | lo. Go to line 12. 'es. Has your landlord obtained an eviction judgment against you? | | | | | |
| | | | No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition. | | | | | |

| Deb | tor 1 Kevin Sterneckert | | | | | _ Case numb | er (if known) | | |
|-----|--|-------------------|-----------------------------|---|---|--|---|--|---|
| Pa | ert 3: Report About Ar | ıy Bı | usine | sses You Own as a | a Sole P | roprietor | | | |
| 12. | Are you a sole proprietor of any full- or part-time business? | ☑ | | Go to Part 4. Name and location of b | usiness | | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | Name of business, if any Number Street | | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. | | | Single Asset Rea Stockbroker (as of | ness (as d Il Estate (a defined in ² er (as defir | scribe your busine lefined in 11 U.S.0 is defined in 11 U 11 U.S.C. § 101(5 ned in 11 U.S.C. § | C. § 101(27A)) .S.C. § 101(51B 53A)) | ZIP Co | ode |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small business</i> <i>debtor</i> or a debtor as defined by 11 U.S.C. § 1182(1)? | cho are mos | osing a a sma st rece | filing under Chapter 11, to proceed under Subch Il business debtor or you nt balance sheet, statem f these documents do no I am not filing under C | apter V so u are choos nent of ope ot exist, fol | o that it can set apposing to proceed uperations, cash-flow the procedure | <i>propriate deadlii</i> nder Subchapter v statement, and | nes. If yo r V, you m I federal ir | u indicate that you lust attach your ncome tax return |
| ! | For a definition of small business debtor, see 11 U.S.C. § 101(51D). | | No. | I am filing under Chap the Bankruptcy Code. | ter 11, but | I am NOT a smal | ll business debto | or accordin | ng to the definition in |
| | | | Yes. | I am filing under Chap Bankruptcy Code, and | | | | U | |
| | | | Yes. | I am filing under Chap Bankruptcy Code, and | | | | | |
| Pa | Report If You Ov | vn o | r Hav | e Any Hazardous F | roperty | or Any Prope | erty That Nee | eds Imn | nediate Attention |
| 14. | Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or | | No Yes. | What is the hazard? | | | | | |
| | safety? Or do you own any property that needs immediate attention? | | | If immediate attention | is needed. | , why is it needed | ? | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | Where is the property? | Number | Street | | | |
| | | | | | City | | | State | ZIP Code |

Debtor 1 Kevin Sterneckert Case number (if known)

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a

About Debtor 1:

certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Debtor 1 | | Kevin Sterneckert | | | Case number (if | Case number (if known) | | |
|----------|--|---|-------------------------|--|-----------------|--|-------|--|
| P | art 6: | Answer These C | luesti | ons for Reporting Pu | ırpos | ses | | |
| 16. | What k have? | ind of debts do you | 16a. | | - | sumer debts? Consumer de rimarily for a personal, family, | | re defined in 11 U.S.C. § 101(8) usehold purpose." |
| | | | 16b. | money for a business or No. Go to line 16c. Yes. Go to line 17. | invest | ment or through the operation | of th | |
| | | | 16c. | State the type of debts yo | ou ow | e that are not consumer or bu | sines | s debts. |
| 17. | Are you | u filing under r 7? | $\overline{\mathbf{A}}$ | No. I am not filing under | · Chap | oter 7. Go to line 18. | | |
| | any exc exclude admini are pai availab | estimate that after empt property is ed and strative expenses d that funds will be lef for distribution ecured creditors? | | - | • | • | - | xempt property is excluded and to distribute to unsecured creditors? |
| 18. | | any creditors do timate that you | | 1-49 50-99 100-199 200-999 | | 1,000-5,000 5,001-10,000 10,001-25,000 | | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. | | uch do you te your assets to th? | | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. | | uch do you te your liabilities to | | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |

| Debtor 1 | Kevin Sterneckert | | Case number (if known) |
|----------|-------------------|--|--|
| Part 7: | Sign Below | | |
| or you | | I have examined this petition, and I declar and correct. | e under penalty of perjury that the information provided is true |
| | | am aware that I may proceed, if eligible, under Chapter 7, 11, 12, derstand the relief available under each chapter, and I choose to | |
| | | , | pay or agree to pay someone who is not an attorney to help me read the notice required by 11 U.S.C. § 342(b). |
| | | I request relief in accordance with the cha | pter of title 11, United States Code, specified in this petition. |
| | | | ncealing property, or obtaining money or property by fraud in sult in fines up to \$250,000, or imprisonment for up to 20 years, and 3571. |
| | | X /s/ Kevin Sterneckert Kevin Sterneckert, Debtor 1 | XSignature of Debtor 2 |
| | | Executed on 07/31/2020 MM / DD / YYYY | Executed on MM / DD / YYYY |

| Debtor 1 | Kevin Sterneckert | | | Case num | ber (if know | n) | | | |
|---|-------------------|--|---|-------------|--------------------|------------------------------|--|--|--|
| For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page. | | I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. | | | | | | | |
| | | X /s/ Magdaler Signature of A | na Gonzales attorney for Debtor | | Date | 07/31/2020 MM / DD / YYYY | | | |
| | | Firm Name | Gonzales of Magdalena Gonzale ock, Ste. 130 Street | 9 \$ | | | | | |
| | | San Antonio City |) | | TX State | 78230 ZIP Code | | | |
| | | Contact phone | e (210) 530-5002 | Email add | ress | | | | |
| | | 00787558 | | | Ctoto | _ | | | |
| | | Bar number | | , | State | | | | |

| Fill in this inf | ormation to identif | | and this filings | | | | |
|---|--|---------------------------------|---|---|---------------------------------------|--|--|
| Debtor 1 | ormation to identif Kevin First Name M | liddle Name | Sterneckert Last Name | | | | |
| Debtor 2 (Spouse, if filing) | First Name M | liddle Name | Last Name | | | | |
| United States Bar | nkruptcy Court for the: <u>V</u> | VESTERN DI | STRICT OF TEXAS | | | | |
| Case number (if known) | | | | _ | c if this is an ded filing | | |
| Official Form | 106A/B | | | | | | |
| Schedule A/ | B: Property | | | | 12/15 | | |
| Part 1: Des | On the top of any add | litional pages, ence, Buildi | ring correct information. If mo, write your name and case nu | ember (if known). Answer even | ery question. | | |
| □ No. Go t | | uitable interes | t in any residence, building, la | and, or similar property? | | | |
| 1.1. 10620 Bridlewood Homestead - 7 a | od Trail, Boerne, Tex | as Check all | he property? that apply. e-family home | Do not deduct secured claims or exemptions. Put th amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. | | | |
| | | Duple | ex or multi-unit building Iominium or cooperative | Current value of the entire property? | Current value of the portion you own? | | |
| Kendall County | | — 📙 Manu | ufactured or mobile home | \$1,078,800.00 | \$1,078,800.00 | | |
| | | | stment property share | Describe the nature of you interest (such as fee sim entireties, or a life estate | ple, tenancy by the | | |
| | | | an interest in the property? | Fee Owner | | | |
| | | Debte | ne. or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and anoth | Check if this is community property (see instructions) | | | |
| | | | ormation you wish to add about identification number: 780 | ' | | | |

\$1,078,800.00

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any

entries for pages you have attached for Part 1. Write that number here.....

| Deb | tor 1 Kevin | Sterne | eckert | Cas | e number (if known) | | |
|--------------------|--------------------------------------|----------------|----------------------|--|--|---|--|
| Pa | art 2: Des | cribe \ | our Vehicles | | | | |
| | | | | interest in any vehicles, whether they are a vehicle, also report it on Schedule G: Exec | | | |
| 3. | Cars, vans, tru | ıcks, tra | ctors, sport utility | vehicles, motorcycles | | | |
| | □ No ✓ Yes | | | | | | |
| 3.1. Mak Mod | el: | Ford F150 |) | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured clai amount of any secured clai <i>Creditors Who Have Claim</i> Current value of the | ims on Schedule D: | |
| Yea | | | | Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | roximate mileager er information: | e: <u>73,0</u> | <u> </u> | At least one of the debtors and another | \$6,800.00 | \$6,800.00 | |
| | | approx | . 75000 miles) | Check if this is community property (see instructions) | | | |
| 3.2. Mak | | Ford | | Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured clai amount of any secured clai Creditors Who Have Claim | ms on Schedule D: | |
| Mod | | Exp 2012 | edition | Debtor 2 only | Current value of the | Current value of the | |
| Yea | r: roximate mileag | | | Debtor 1 and Debtor 2 only | entire property? | portion you own? | |
| | er information: | e. <u>103,</u> | 000 | At least one of the debtors and another | \$18,975.00 | \$18,975.00 | |
| | 2 Ford Exped | ition (a | pprox. 105000 | Check if this is community property (see instructions) | | | |
| 4. | | | | and other recreational vehicles, other veh al watercraft, fishing vessels, snowmobiles, m | | | |
| 5. | | | | wn for all of your entries from Part 2, inclu Part 2. Write that number here | | \$25,775.00 | |
| Pa | art 3: Des | cribe ` | our Personal a | and Household Items | • | | |
| Do y | ou own or hav | e any le | gal or equitable in | terest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. | |
| 6. | | | · | ens, china, kitchenware | | | |
| | ☐ No ✓ Yes. Desc | ribe | Household goo | ds & furnishings | | \$10,000.00 | |
| 7. | | | | video, stereo, and digital equipment; compute | | - | |
| | ☐ No ☑ Yes. Desc | ribe | Electronics | | | \$5,000.00 | |

| Deb | tor 1 Kevin Stern | eckert Case number (if known) | |
|------|--|--|---|
| 8. | | and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; n, or baseball card collections; other collections, memorabilia, collectibles | |
| | ☐ No ☑ Yes. Describe | Art Work | \$200.00 |
| 9. | | s and hobbies otographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; d kayaks; carpentry tools; musical instruments | _ |
| | ☐ No ☑ Yes. Describe | golf clubs-100.00 Treadmill- 100.00 Step Climber- 100.00 | \$300.00 |
| 10. | | es, shotguns, ammunition, and related equipment | |
| | Yes. Describe | | |
| 11. | □ No | clothes, furs, leather coats, designer wear, shoes, accessories | |
| | Yes. Describe | Clothing | \$500.00 |
| 12. | Jewelry Examples: Everyday j gold, silve | ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems | , |
| | ☐ No ☑ Yes. Describe | Jewelry | \$200.00 |
| 13. | Non-farm animals Examples: Dogs, cats | , birds, horses | |
| | Yes. Describe | dog/s | \$0.00 |
| 14. | Any other personal a did not list No Yes. Give specific information | | ٦ |
| 15. | | of all of your entries from Part 3, including any entries for pages you have Nrite the number here | \$16,200.00 |
| Pa | | Your Financial Assets | |
| Do y | ou own or have any l | egal or equitable interest in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | Cash Examples: Money you petition | have in your wallet, in your home, in a safe deposit box, and on hand when you file your | |
| | □ No ✓ Yes | Cash: | \$5.00 |

| Deb | tor 1 Kevin Sterneckert | | Case number (if known) | |
|-----|--|---|---|------------|
| 17. | | accounts; certificates of deposit; shares in credit unions, institutions. If you have multiple accounts with the same | | |
| | □ No ☑ Yes | Institution | name: | |
| | 17.1. Checking accoun | nt: Checking | g account-USAA | \$200.00 |
| 18. | Bonds, mutual funds, or pub Examples: Bond funds, invest | - | s h brokerage firms, money market accounts | |
| | ✓ No YesIns | stitution or issuer r | name: | |
| 19. | Non-publicly traded stock an an interest in an LLC, partner | | orporated and unincorporated businesses, including enture | |
| | ✓ No Yes. Give specific information about them Na | ame of entity: | % of ownership: | |
| 20. | Negotiable instruments include | e personal checks, | egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. t transfer to someone by signing or delivering them. | |
| | ✓ No Yes. Give specific information about them Is: | suer name: | | |
| 21. | Retirement or pension accou Examples: Interests in IRA, Eff profit-sharing plans | RISA, Keogh, 401(| k), 403(b), thrift savings accounts, or other pension or | |
| | No✓ Yes. List each account separately. Typ | e of account: | Institution name: | |
| | 401 | (k) or similar plan: | 401(k) - Vanguard | \$1,727.92 |
| 22. | • | sits you have mad | e so that you may continue service or use from a company ent, public utilities (electric, gas, water), telecommunications | |
| | ✓ No ☐ Yes | In | stitution name or individual: | |
| 23. | | | ment of money to you, either for life or for a number of years) | |
| | ✓ No YesIss | suer name and de | scription: | |
| 24. | _ | A, in an account in | n a qualified ABLE program, or under a qualified state tuition program | |
| | ✓ No ✓ Yes | stitution name and | description. Separately file the records of any interests. 11 U.S.C. § 521 | (c) |
| 25. | — | terests in propert | cy (other than anything listed in line 1), and rights or | X-7 |
| | ✓ No | | | |
| | Yes. Give specific information about them | | | |

| Deb | tor 1 Kevin Sterneckert | | Case number (if known) | |
|-----|---|---|----------------------------|---|
| 26. | | , trade secrets, and other intellectual property | | |
| | , | s, websites, proceeds from royalties and licensing | g agreements | |
| | ✓ No ☐ Yes. Give specific | | | |
| | information about them | | | |
| 27. | Licenses, franchises, and other <i>Examples:</i> Building permits, exclu | general intangibles usive licenses, cooperative association holdings, | liquor licenses, professio | nal licenses |
| | ☑ No | | | |
| | Yes. Give specific information about them | | | |
| Mor | ney or property owed to you? | | | Current value of the |
| | icy of property chica to you. | | | <pre>portion you own? Do not deduct secured</pre> |
| | | | | claims or exemptions. |
| 28. | Tax refunds owed to you | | | |
| | ☑ No | | | |
| | Yes. Give specific information | ו | | Federal: |
| | about them, including whether | | | State: |
| | you already filed the returns and the tax years | | | Local: |
| | | | | Local. |
| 29. | Framily support | alimony, spousal support, child support, mainten | ance divorce settlement | property settlement |
| | No No | aimony, spousai support, child support, mainten | ance, divorce settlement, | property settlement |
| | Yes. Give specific information | า | Alimony: | |
| | _ | | Maintenand | ce: |
| | | | | |
| | | | Support: | |
| | | | Divorce se | ttlement: |
| | | | Property se | ettlement: |
| 30. | Other amounts someone owes y | /ou | | |
| | | ty insurance payments, disability benefits, sick pa | | ' |
| | • | Security benefits; unpaid loans you made to some | eone eise | |
| | ✓ No✓ Yes. Give specific information | n | | |
| | Too. Give opening information | | | |
| 31. | Interests in insurance policies Examples: Health, disability, or life | e insurance; health savings account (HSA); credi | t, homeowner's, or renter | 's insurance |
| | ☐ No | | | |
| | Yes. Name the insurance | | | |
| | company of each policy and list its value | Company name: Be | eneficiary: | Surrender or refund value: |
| | 7 | Term Life Na | atalie Sternecker | \$0.00 |
| 32 | Any interest in property that is d | lue you from someone who has died | | |
| JZ. | | g trust, expect proceeds from a life insurance pol | icy, or are currently | |
| | ☑ No | | | |
| | Yes. Give specific information | ו | | |

| Debt | or 1 | Kevin Sterned | ckert | Case number (if known | 1) |
|------|------------------|---|-------------------------------|--|--|
| 33. | Example | • | | ner or not you have filed a lawsuit or made a demand for payment isputes, insurance claims, or rights to sue | |
| | ☑ No □ Yes | . Describe each | claim | | |
| 34. | rights to | ontingent and u | nliquidated | claims of every nature, including counterclaims of the debtor and | I |
| | ☑ No □ Yes | . Describe each | claim | | |
| 35. | | ancial assets yo | ou did not ali | ready list | |
| | ✓ No ☐ Yes | . Give specific ir | nformation | | |
| 36. | Add the attached | e dollar value of d for Part 4. Wri | all of your e ite that num | entries from Part 4, including any entries for pages you have ber here | → \$1,932.92 |
| Pa | rt 5: | Describe Any | / Business | s-Related Property You Own or Have an Interest In. L | ist any real estate in Part 1. |
| 37. | Do you | own or have an | y legal or ed | quitable interest in any business-related property? | |
| | | Go to Part 6 Go to line 38. | | | |
| | | | | | Current value of the portion you own? Do not deduct secured |
| 38. | Accoun | ts receivable or | commissio | ns you already earned | claims or exemptions. |
| | ☑ No □ Yes | . Describe | | | |
| 39. | Example | equipment, furnis es: Business-rela desks, chairs | ated compute | ers, software, modems, printers, copiers, fax machines, rugs, telephon | nes, |
| | ☑ No ☐ Yes | . Describe | | | |
| 40. | Machine | ery, fixtures, equ | uipment, su | pplies you use in business, and tools of your trade | |
| | □ No ✓ Yes | l l | Cannon Ca | amera w/lenses - 1200.00 - 1250.00 | \$2,450.00 |
| 41. | Invento | ry | | | |
| | ☑ No □ Yes | . Describe | | | |

| Deb | tor 1 i | Kevin Sterneckert | Case number (if known) | |
|-----|----------------|--|---|---|
| 42. | Interests | in partnerships or joi | int ventures | |
| | ✓ No ☐ Yes. | Describe Name of | entity: % of ownership: | |
| 43. | Custome | r lists, mailing lists, o | or other compilations | |
| | ✓ No ☐ Yes. | Do your lists include No Yes. Describe | personally identifiable information (as defined in 11 U.S.C. § 101(41A))? | |
| 44. | Any bus | ness-related property | you did not already list | |
| | ✓ No ☐ Yes. | Give specific informati | ion. | |
| 45. | | | our entries from Part 5, including any entries for pages you have number here | \$2,450.00 |
| Pa | | | a- and Commercial Fishing-Related Property You Own or Have arn interest in farmland, list it in Part 1. | n Interest In. |
| 46. | Do you o | wn or have any legal | or equitable interest in any farm- or commercial fishing-related property? | |
| | _ | Go to Part 7. Go to line 47. | | |
| | _ | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 47. | • | mals s: Livestock, poultry, fa | rm-raised fish | |
| | ✓ No ☐ Yes | | | |
| 48. | Cropse | ither growing or harve | ested | |
| | _ | Give specific | | |
| 49. | Farm and | d fishing equipment, in | mplements, machinery, fixtures, and tools of trade | |
| | ✓ No ☐ Yes | | | |
| 50. | Farm and | d fishing supplies, che | emicals, and feed | |
| | ✓ No ☐ Yes | | | |
| 51. | Any farm | - and commercial fish | ning-related property you did not already list | |
| | | Give specific | | |
| 52. | | | our entries from Part 6, including any entries for pages you have | \$0.00 |

| Debt | tor 1 | Kevin Sterneckert | Case nu | ımber (if known) | |
|------|-----------|---|-----------------------|------------------------------|-----------------------|
| Pa | art 7: | Describe All Property You Own or Have an I | nterest in That You D | oid Not List Above | |
| 53. | • | u have other property of any kind you did not already li ples: Season tickets, country club membership | st? | | |
| | □ No ✓ Ye | o es. Give specific information. | | | |
| | 2 | 018 tax refund | | | \$54,000.00 |
| 54. | Add th | ne dollar value of all of your entries from Part 7. Write t | hat number here | | \$54,000.00 |
| Pa | art 8: | List the Totals of Each Part of this Form | | | |
| 55. | Part 1: | : Total real estate, line 2 | | → | \$1,078,800.00 |
| 56. | Part 2: | : Total vehicles, line 5 | \$25,775.00 | | |
| 57. | Part 3: | : Total personal and household items, line 15 | \$16,200.00 | | |
| 58. | Part 4: | : Total financial assets, line 36 | \$1,932.92 | | |
| 59. | Part 5: | : Total business-related property, line 45 | \$2,450.00 | | |
| 60. | Part 6: | : Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: | : Total other property not listed, line 54 | +\$54,000.00 | | |
| 62. | Total p | personal property. Add lines 56 through 61 | \$100,357.92 | Copy personal property total | + \$100,357.92 |
| 63. | Total o | of all property on Schedule A/B. Add line 55 + line 62. | | | \$1,179,157.92 |

| s possible. If two many schedule A/B: Proach to this page as per (if known). claim as exempt, nount as exempt, and applicable stax-exempt retiremarket value under a leed that amount, your property You Care you claiming? It is and federal nonbarral exemptions. | Claim as Exemple and response to the control of the | pt pt g toget 96A/B 2: Ad e amoo y clain xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx | ther, both are equally re) as your source, list the ditional Page as necessary as necessary as the full fair market to tionssuch as those and in dollar amount. It is not to a particular doll imited to the applicability of the page 1.5.C. § 522(b)(3) | with you. below. |
|--|--|--|---|--|
| poperty You Cosposible. If two many schedule A/B: Property of the spage as per (if known). I claim as exempt, sound as exempt, sound as exempt retirement when the value under a speed that amount, your claiming? Property You Cosposible and federal nonbase and feder | claim as Exempt Partial people are filing operty (Official Form 10 many copies of Part You must specify the Alternatively, you may tatutory limit. Some enent funds—may be unlaw that limits the execution would be claim as Exempt Check one only, ankruptcy exemptions. 1 U.S.C. § 522(b)(2) that you claim as exe Current value of | pt g togel 06A/B 2: Ad a amoo y clain teempti d be li even 11 U | ther, both are equally re) as your source, list the ditional Page as necessary as necessary as the full fair market of the exemption of the exemption state of the applicable of the page | amended filing O4/ esponsible for supplying correct information e property that you claim as exempt. If mo essary. On the top of any additional pages, you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an lar amount and the value of the le statutory amount. with you. |
| s possible. If two many schedule A/B: Property You Cach to this page as per (if known). I claim as exempt, fount as exempt retirement and a second to the s | pharried people are filing operty (Official Form 10 many copies of Part you must specify the Alternatively, you may tatutory limit. Some enent funds—may be unlaw that limits the exception would claim as Exempt Check one only, ankruptcy exemptions. U.S.C. § 522(b)(2) that you claim as exe | pt pt toget pt | ther, both are equally re) as your source, list the ditional Page as necessary as necessary as the full fair market of the exemption of the exemption state of the applicable of the page | amended filing O4/ esponsible for supplying correct information e property that you claim as exempt. If mo essary. On the top of any additional pages, you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an lar amount and the value of the le statutory amount. with you. |
| s possible. If two many schedule A/B: Property from the second of the se | narried people are filing operty (Official Form 10 many copies of Part you must specify the Alternatively, you may tatutory limit. Some enent funds—may be unlaw that limits the exceptour exemption would claim as Exempt Check one only, ankruptcy exemptions. 1 U.S.C. § 522(b)(2) that you claim as exe Current value of | g toget g toget g toget a amoo g clain y clain y clain interest empti d be li | as your source, list the ditional Page as necessary as necessary as necessary as the full fair market of the second in dollar amount. It is not to a particular doll imited to the applicable of the full fair spouse is filing as second in the information of the full fair the information in the difference of the full fair full | esponsible for supplying correct information e property that you claim as exempt. If mo essary. On the top of any additional pages, you claim. One way of doing so value of the property being for health aids, rights to However, if you claim an lar amount and the value of the le statutory amount. with you. |
| s possible. If two many schedule A/B: Property from the second of the se | narried people are filing operty (Official Form 10 many copies of Part you must specify the Alternatively, you may tatutory limit. Some enent funds—may be unlaw that limits the exceptour exemption would claim as Exempt Check one only, ankruptcy exemptions. 1 U.S.C. § 522(b)(2) that you claim as exe Current value of | g toget g toget g toget a amoo g clain y clain y clain interest empti d be li | as your source, list the ditional Page as necessary as necessary as necessary as the full fair market of the second in dollar amount. It is not to a particular doll imited to the applicable of the full fair spouse is filing as second in the information of the full fair the information of the difference of the full fair full | esponsible for supplying correct information e property that you claim as exempt. If mossary. On the top of any additional pages, you claim. One way of doing so value of the property being for health aids, rights to however, if you claim an lar amount and the value of the le statutory amount. with you. |
| s possible. If two many schedule A/B: Property from the second of the se | narried people are filing operty (Official Form 10 many copies of Part you must specify the Alternatively, you may tatutory limit. Some enent funds—may be unlaw that limits the exceptour exemption would claim as Exempt Check one only, ankruptcy exemptions. 1 U.S.C. § 522(b)(2) that you claim as exe Current value of | g toget g toget g toget a amoo g clain y clain y clain interest empti d be li | as your source, list the ditional Page as necessary as necessary as necessary as the full fair market of the second in dollar amount. It is not to a particular doll imited to the applicable of the full fair spouse is filing as second in the information of the full fair the information of the difference of the full fair full | esponsible for supplying correct information e property that you claim as exempt. If mossary. On the top of any additional pages, you claim. One way of doing so value of the property being for health aids, rights to however, if you claim an lar amount and the value of the le statutory amount. with you. |
| schedule A/B: Property You Care you claiming? ear you claiming? ear you claiming? e and federal nonbactal exemptions. 11 on Schedule A/B rty and line on | you must specify the Alternatively, you may tatutory limit. Some enter funds—may be unlaw that limits the extraordress exempt Check one only, ankruptcy exemptions. U.S.C. § 522(b)(2) that you claim as exe | e amou y clair exemp ilimite empti d be li | as your source, list the ditional Page as necessary as necessary as necessary as the full fair market of the second in dollar amount. It is not to a particular doll imited to the applicable of the full fair spouse is filing as second in the information of the full fair the information of the difference of the full fair full | e property that you claim as exempt. If mo essary. On the top of any additional pages, you claim. One way of doing so value of the property being for health aids, rights to however, if you claim an lar amount and the value of the le statutory amount. with you. |
| fany applicable st ax-exempt retirem rket value under a eed that amount, y Property You C are you claiming? e and federal nonbarral exemptions. 11 on Schedule A/B rty and line on | Alternatively, you may tatutory limit. Some element funds—may be un law that limits the exception would claim as Exempt Check one only, ankruptcy exemptions. 1 U.S.C. § 522(b)(2) that you claim as exe | y clain exemp hlimite empti d be li even 11 U | m the full fair market obtionssuch as those ed in dollar amount. It is not a particular doll imited to the applicable of your spouse is filing .S.C. § 522(b)(3) | value of the property being for health aids, rights to However, if you claim an lar amount and the value of the le statutory amount. with you. |
| are you claiming? e and federal nonberal exemptions. 11 on Schedule A/B rty and line on | ? Check one only, ankruptcy exemptions. 1 U.S.C. § 522(b)(2) that you claim as exe | 11 U | S.C. § 522(b)(3) | below. |
| e and federal nonbactal exemptions. 11 on Schedule A/B rty and line on | ankruptcy exemptions. 1 U.S.C. § 522(b)(2) that you claim as exe Current value of | 11 U | S.C. § 522(b)(3) | below. |
| eral exemptions. 11 on <i>Schedule A/B</i> rty and line on | 1 U.S.C. § 522(b)(2) that you claim as exe Current value of | empt, 1 | fill in the information | |
| on <i>Schedule A/B</i> | that you claim as exe | • | | |
| rty and line on | Current value of | • | | |
| • | | Am | ount of the | Consider laws that allow assessed as |
| | the portion you own | exe | emption you claim | Specific laws that allow exemption |
| | Copy the value from Schedule A/B | | eck only one box for ch exemption | |
| | \$1,078,800.00 | V | \$101,725.30 | Const. art. 16 §§ 50, 51, Texas |
| erne, Texas | | | 100% of fair market | Prop. Code §§ 41.001002 |
| | | | | |
| | | | limit | |
| | \$6,800.00 | | \$6,800.00 | Tex. Prop. Code §§ 42.001(a), |
| 5000 miles) | | _ | 100% of fair market value, up to any applicable statutory limit | 42.002(a)(9) |
| | 6000 miles) | | erne, Texas | serne, Texas 100% of fair market value, up to any applicable statutory limit \$6,800.00 \$6,800.00 100% of fair market value, up to any applicable statutory limit applicable statutory limit |

| Debtor 1 | Kevin Sterneckert | Case number (if known) | | | | | |
|--|--|--|-------------------------|--|--|--|--|
| Part 2: | Additional Page | | | | | | |
| | ription of the property and line on 4/B that lists this property | Current value of the portion you own | | ount of the mption you claim | Specific laws that allow exemption | | |
| | | Copy the value from Schedule A/B | | eck only one box for h exemption | | | |
| miles) | ption: I Expedition (approx. 105000 Schedule A/B: 3.2 | \$18,975.00 | | \$8,285.45 100% of fair market value, up to any applicable statutory limit | Tex. Prop. Code §§ 42.001(a), 42.002(a)(9) | | |
| Brief descri | • | \$10,000.00 | $\overline{\mathbf{Q}}$ | \$10,000.00 | Tex. Prop. Code §§ 42.001(a), | | |
| | ld goods & furnishings chedule A/B: 6 | | | 100% of fair market value, up to any applicable statutory limit | 42.002(a)(1) | | |
| Brief descri | • | \$5,000.00 | | \$5,000.00 100% of fair market | Tex. Prop. Code §§ 42.001(a), 42.002(a)(1) | | |
| Line from S | Schedule A/B: 7 | | | value, up to any applicable statutory limit | | | |
| - | -100.00 | \$300.00 | | \$300.00 100% of fair market value, up to any applicable statutory limit | Tex. Prop. Code §§ 42.001(a), 42.002(a)(8) | | |
| Brief descri | | \$500.00 | | \$500.00 100% of fair market value, up to any | Tex. Prop. Code §§ 42.001(a), 42.002(a)(5) | | |
| Line from S | Schedule A/B: 11 | | | applicable statutory | | | |
| Brief descri Jewelry Line from S | ption: Schedule A/B:12 | \$200.00 | | \$200.00 100% of fair market value, up to any applicable statutory limit | Tex. Prop. Code §§ 42.001(a), 42.002(a)(6) | | |
| Brief descri | ption: | \$0.00 | | \$0.00 100% of fair market | Tex. Prop. Code §§ 42.001(a), 42.002(a)(11) | | |
| _ | Schedule A/B:13 | | | value, up to any applicable statutory limit | | | |
| Brief descri | • | \$1,727.92 | <u> </u> | \$1,727.92 100% of fair market | 11 U.S.C. § 522(b)(3)(C) | | |
| | Schedule A/B: 21 | | | value, up to any applicable statutory limit | | | |
| Brief descri | • | \$0.00 | ☑ | \$0.00 100% of fair market | Tex. Ins. Code §§ 1108.001, 1108.051 | | |
| Line from S | Cchedule A/B: 31 | | | value, up to any applicable statutory limit | | | |

| Fill in this info | ormation to identif | y your case: | | | | | | |
|---|--|-------------------------|---|-------------------------------------|------------------|-------|--|--|
| Debtor 1 | Kevin | idalla Nama | Sterneckert | | | | | |
| | First Name M | iddle Name | Last Name | | | | | |
| Debtor 2 (Spouse, if filing) | First Name M | iddle Name | Last Name | | | | | |
| | | ESTERN DISTR | ICT OF TEVAS | | | | | |
| | nkruptcy Court for the: <u>W</u> | IESTERN DISTR | ICT OF TEXAS | | | | | |
| Case number (if known) | | | | | Check if this is | | | |
| | | | | | amended filing | J | | |
| Official Form | | | | | | | | |
| Schedule D: | Creditors Who | Have Claim | s Secured by | Property | | 12/15 | | |
| correct informatio On the top of any 1. Do any credit No. Chee Yes. Fill Part 1: Lis 2. List all secure claim, list the correditor has a much as poss | No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims | | | | | | | |
| 2.1 | | Describe the pro | | \$2,133.22 | \$1,078,800.00 | | | |
| Charlesworth Po | ool Maintenance | 10620 Bridlewo | ood Trail, | | | | | |
| dba Boerne Poo | l Maint. & Supplies | Boerne, Texas | | | | | | |
| Number Street 12245 S. Main St | t. | | | | | | | |
| | | | ou file, the claim is: | Check all that apply. | | | | |
| Boerne | TX 78006 | Contingent Unliquidated | | | | | | |
| City | State ZIP Code | Disputed | | | | | | |
| Who owes the deb | ot? Check one. | | Check all that apply. | | | | | |
| Debtor 2 only | | _ | it you made (such as (such as tax lien, me | mortgage or secured echanic's lien) | car loan) | | | |
| Debtor 1 and D | • | Judgment lier | n from a lawsuit | | | | | |
| | the debtors and another | Other (includi | ing a right to offset) endered - Judgme | ant . | | | | |
| to a communit | | OCI VICES KI | endered - Judgille | FIIL | | | | |
| Date debt was inc | urred | _Last 4 digits of a | ccount number | | | | | |

\$2,133.22

| Debtor 1 | Kevin Sterneckert | Case number (if known) | | | | | | |
|---|---|---|---|---|-----------------------------------|--|--|--|
| Part 1: | Additional Page After listing any entries on sequentially from the previous | | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any | | | |
| Dearborn City Who owes t Debtor 1 Debtor 1 At least | MI 48121 State ZIP Code he debt? Check one. only | ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☑ An agreement you made (such as | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) | | | | | |
| | nmunity debt | Last 4 digits of account number | | | | | | |
| Fully sec | tfolio Servicing, Inc e 250 | Describe the property that secures the claim: 10620 Bridlewood Trail, Boerne, TX | \$710,589.00 | \$1,078,800.00 | | | | |
| Debtor 1 Debtor 2 Debtor 1 Debtor 1 At least c | State ZIP Code he debt? Check one. only | As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, med Judgment lien from a lawsuit) Other (including a right to offset) Conventional Real Estate Modern | mortgage or secured echanic's lien) | car loan) | | | | |
| Date debt w | as incurred <u>08/2009</u> | Last 4 digits of account number | 6 1 7 2 | | | | | |
| Conduit | | | | | | | | |

\$721,278.55

| Debtor 1 | Kevin Sterneckert | Case number (if known) | | | | | |
|--|---|---|--|---|-----------------------------------|--|--|
| Part 1: | Additional Page After listing any entries on sequentially from the previous | | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any | | |
| PO Box 65 | | Describe the property that secures the claim: 10620 Bridlewood Trail, Boerne, TX | \$214,180.78 | \$214,180.78 | | | |
| Debtor 1 Debtor 2 Debtor 1 Debtor 1 At least Check i | State ZIP Code he debt? Check one. only | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Mortgage arrears | | | | | |
| Date debt w | as incurred <u>Various</u> & Sep 2020 | Last 4 digits of account number | 6 1 7 2 | | | | |
| 2.5 USAA Fed Creditor's nam 10750 McE | eral Savings Bank | Describe the property that secures the claim: 10620 Bridlewood Trail, Boerne, TX | \$50,171.70 | \$1,078,800.00 | | | |
| Debtor 1 Debtor 2 Debtor 1 Debtor 1 At least Check i | State ZIP Code he debt? Check one. only | As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, med Judgment lien from a lawsuit Other (including a right to offset) Home Equity Line of Credit | mortgage or secured | car loan) | | | |
| | as incurred 05/2010 | Last 4 digits of account number | 1 0 6 7 | | | | |
| Conduit | | | | | | | |

\$264,352.48

| Debior | Kevin Sterneckert | | Case number (if known) | | | |
|---|---|--|--|---|-----------------------------------|--|
| Part 1: | Additional Page After listing any entries of sequentially from the pre- | n this page, number them vious page. | Column A Amount of claim Do not deduct the value of collateral | Column B Value of collateral that supports this claim | Column C Unsecured portion If any | |
| Creditor's nam | eral Savings Bank le Dermott Freeway reet | Describe the property that secures the claim: — 10620 Bridlewood Trail, Boerne, TX | \$23,897.60 | \$23,897.60 | | |
| Debtor 1 Debtor 2 Debtor 1 At least Check i | State ZIP Code the debt? Check one. I only | As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, m Judgment lien from a lawsuit Judgment lien from a lawsuit Other (including a right to offset) Arrearage claim | s mortgage or secured | car loan) | | |
| Date debt w | vas incurred <u>Various</u> | Last 4 digits of account number | 1 0 6 7 | | | |
| GAP Aug 8 | & Sep 2020 | | | | | |

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Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

\$23,897.60

\$1,011,661.85

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

| Debtor 1 | Kevin Sterneckert | | | Case number (if known) | |
|----------------------------------|--|--------------------------------|-----------------------------------|--|-----|
| Part : | 2: List Others to Be Notif | ied for a | Debt That Yo | u Already Listed | |
| example then list list the | e, if a collection agency is trying to t the collection agency here. Simi | o collect fro larly, if you | m you for a deb have more than | uptcy for a debt that you already listed in Part 1. For t you owe to someone else, list the creditor in Part 1, and one creditor for any of the debts that you listed in Part 1, ns to be notified for any debts in Part 1, do not fill out or | |
| 1 | Shapiro & Schwartz LLP | | | On which line in Part 1 did you enter the creditor? | 2.3 |
| | Name 5450 NW Central, Ste. 307 | | | Last 4 digits of account number | |
| | Number Street | | | | _ |
| | | | | | |
| | Houston | TX | 77092 | | |
| | City | State | ZIP Code | | |
| 2 | Weinstein & Riley, PS | | | On which line in Part 1 did you enter the creditor? | 2.5 |
| | Name 6785-4 S. Eastern Ave. | | | Last 4 digits of account number | |
| | Number Street | | | | = |
| | | | | <u> </u> | |
| | las Vegas | NV | 89119 ZIP Code | <u> </u> | |
| | City | State | ZIP Code | | |

| Fill in this inf | ormation to ider | ntify your ca | se: | | | |
|---|--|--|--|--|---|---|
| Debtor 1 | Kevin | | Sterneckert | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bar | nkruptcy Court for the | e: WESTERN | DISTRICT OF TEXAS | | | |
| Case number (if known) | | | | | Check if this is a amended filing | an |
| Official Form | 106E/F | | | | | |
| Schedule E/ | F: Creditors | Who Have | Unsecured Claims | | | 12/15 |
| claims. List the or on <i>Schedule A/B:</i> Do not include any If more space is no to this page. On the | ther party to any ex Property (Official F y creditors with par eeded, copy the Pa | ecutory contra orm 106A/B) ai tially secured o rt you need, fill onal pages, wr | 1 for creditors with PRIORITY clacts or unexpired leases that could not on Schedule G: Executory Conclaims that are listed in Schedule it out, number the entries in the lite your name and case number (ecured Claims | d result in a claim. <i>A</i> ntracts and Unexpire D: Creditors Who H boxes on the left. At | Also list executory of Leases (Officia old Claims Secur | y contracts I Form 106G). ed by Property. |
| 1. Do any credit | ors have priority ur | secured claim | s against you? | | | |
| ☐ No. Go t | | | | | | |
| ☑ Yes. | | | | | | |
| claim. For each show both price more space is claim, list the | ch claim listed, identionity and nonpriority a needed for priority to their creditors in Par | fy what type of one of the control o | reditor has more than one priority u claim it is. If a claim has both priori uch as possible, list the claims in all s, fill out the Continuation Page of Finstructions for this form in the instructions | ty and nonpriority amon ohabetical order acco Part 1. If more than o | ounts, list that clair | n here and or's name. If a particular |
| | | | | Total claim | Priority amount | Nonpriority amount |
| 2.1 | | | | \$3,800.00 | \$3,800.00 | \$0.00 |
| Law Office of Ma | agdalena Gonzale | es | Land A. Parka of an arrow to a complete | | | |
| Priority Creditor's Name 2939 Mossrock, | | | Last 4 digits of account number | | | |
| Number Street | Ste. 130 | | When was the debt incurred? | | - | |
| | | | As of the date you file, the claim | is: Check all that app | ly. | |
| | | | Contingent | | | |
| San Antonio City | | 230 Code | Unliquidated Disputed | | | |
| Who incurred the | debt? Check one | | Type of PRIORITY unsecured cla | im: | | |
| | the debtors and ano | | Domestic support obligations Taxes and certain other debts y Claims for death or personal in intoxicated | • | ent | |
| Is the claim subject | ct to offset? | unity debt | Other. Specify Attorney fees for this case | • | | |
| Pay 1st 4 month | s, then 100/montl | า | | | | |

| Debtor 1 | Kevin Sterneckert | Case number (if known) |
|------------------|---|--|
| Part : | 2: List All of Your NONPRIORIT | Y Unsecured Claims |
| 3. Do | any creditors have nonpriority unsecured | I claims against you? |
| | No. You have nothing to report in this part Yes | . Submit this form to the court with your other schedules. |
| If a typ | creditor has more than one nonpriority unse e of claim it is. Do not list claims already inc | in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify what luded in Part 1. If more than one creditor holds a particular claim, list the other creditors in unsecured claims, fill out the Continuation Page of Part 2. Total claim |
| 4.1 | | \$10,902.14 |
| Americ | ı an Express | Last 4 digits of account number |
| Nonpriorit | ty Creditor's Name | When was the debt incurred? |
| PO Box Number | x 6618 Street | As of the date you file, the claim is: Check all that apply. |
| radifibei | Glicci | _ ☐ Contingent |
| | | Unliquidated |
| Omaha | NE 68105-0618 | Disputed |
| City | State ZIP Code | Type of NONPRIORITY unsecured claim: |
| | curred the debt? Check one. | ☐ Student loans |
| | tor 1 only | Obligations arising out of a separation agreement or divorce |
| _ | otor 2 only Stor 1 and Debtor 2 only | that you did not report as priority claims |
| | east one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts |
| _ | eck if this claim is for a community debt | ✓ Other. Specify Credit Card |
| | laim subject to offset? | Great Gard |
| ✓ No ☐ Yes | | |
| 4.2 | | \$0.00 |
| Best B | ty Creditor's Name | _ Last 4 digits of account number <u>1 1 5 9</u> |
| | x 60148 | When was the debt incurred? 12/2003 |
| Number | Street | As of the date you file, the claim is: Check all that apply. |
| | | _ ☐ Contingent ☐ Unliquidated |
| | | Disputed |
| | Industry CA 91716-0148 | _ |
| City Who inc | State ZIP Code Curred the debt? Check one. | Type of NONPRIORITY unsecured claim: |
| | tor 1 only | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce |
| Deb | otor 2 only | that you did not report as priority claims |
| — | otor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts |
| _ | east one of the debtors and another | Other. Specify |
| | eck if this claim is for a community debt | Credit Card |
| | laim subject to offset? | |
| ✓ No ☐ Yes | | |
| | t Account | |

| Debtor 1 Kevin St | erneckert | Case number (if known) | | | | | |
|--|---------------------------------|---|-------------|--|--|--|--|
| Part 2: Your N | IONPRIORITY Unsecu | red Claims Continuation Page | | | | | |
| After listing any entrie previous page. | es on this page, number the | m sequentially from the | Total claim | | | | |
| 4.3 | | | \$263.67 | | | | |
| Capital One | | Last 4 digits of account number | | | | | |
| Nonpriority Creditor's Name PO Box 85015 | • | When was the debt incurred? | | | | | |
| Number Street | | As of the date you file, the claim is: Check all that apply. | | | | | |
| | | _ Contingent | | | | | |
| | | ☐ Unliquidated ☐ Disputed | | | | | |
| Richmond | VA 23285-5015 | | | | | | |
| City Who incurred the debt | State ZIP Code t? Check one. | Type of NONPRIORITY unsecured claim: | | | | | |
| Debtor 1 only | | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | | | | | |
| Debtor 2 only | 0 | that you did not report as priority claims | | | | | |
| Debtor 1 and Debtor At least one of the | debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| ш | is for a community debt | ✓ Other. Specify Credit Card | | | | | |
| Is the claim subject to | | orean ouru | | | | | |
| ☑ No | | | | | | | |
| Yes | | | | | | | |
| 4.4 | | | \$19,270.52 | | | | |
| Cavalry Portfolio Se | ervices | Last 4 digits of account number 4 1 9 7 | Ψ13,270.32 | | | | |
| Nonpriority Creditor's Name | | When was the debt incurred? 05/2016 | | | | | |
| ATTN: Bankruptcy I | Department | As of the date you file, the claim is: Check all that apply. | | | | | |
| 500 Summit Lake St | te 400 | _ Contingent | | | | | |
| | | ☐ Unliquidated ☐ ☐ Disputed | | | | | |
| Valhalla | NY 10595 | Disputed | | | | | |
| City Who incurred the debt | State ZIP Code t? Check one. | Type of NONPRIORITY unsecured claim: | | | | | |
| Debtor 1 only | Oncok onc. | Student loans Obligations crising out of a congretion agreement or diverse | | | | | |
| Debtor 2 only | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| Debtor 1 and Debto | • | Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| _ | debtors and another | Other. Specify | | | | | |
| _ | n is for a community debt | Current creditor - credit card | | | | | |
| Is the claim subject to No No | UIISEL! | | | | | | |
| Yes | | | | | | | |
| Original Creditor Na | me: CITIBANK | | | | | | |

Collection

| Debtor 1 Kevin Sterneckert | Case number (if known) | |
|--|--|-------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | em sequentially from the | Total claim |
| 4.5 | | \$0.00 |
| Credit Collection Service | Last 4 digits of account number 8 5 5 7 | |
| Nonpriority Creditor's Name | When was the debt incurred? 12/27/2016 | |
| PO Box 773 Number Street | As of the date you file, the claim is: Check all that apply. | |
| Number Street | _ Contingent | |
| | Unliquidated | |
| No odkoro MA 00404 | — | |
| Needham MA 02494 City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only | ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only | that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| | | |
| Is the claim subject to offset? | Collection Services - Medical Services | |
| No | | |
| Yes | | |
| Original Creditor Name: QUEST DIAGNOST | ICS INCORPORAT | |
| Collection | | |
| 4.6 | | ¢2 000 00 |
| | Last 4 digits of account number | \$3,800.00 |
| Law Office of Magdalena Gonzales P.C. Nonpriority Creditor's Name | When was the debt incurred? | |
| 2939 Mossrock, Ste. 130 | | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | ☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent | |
| | Disputed | |
| San Antonio TX 78230 City State ZIP Code | | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only | that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| | Other. Specify | |
| Check if this claim is for a community debt | Attorney Fees in a prior case | |
| Is the claim subject to offset? | | |
| ☑ No ☐ Yes | | |

| Debtor 1 | Kevin Sterneckert | Case number (if known) | |
|---------------------------|---|---|-------------|
| Part 2: | Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listin | ng any entries on this page, number the page. | m sequentially from the | Total claim |
| 4.7 | | | \$1,608.42 |
| Quantum | 3 Group LLC | Last 4 digits of account number | |
| Nonpriority C P.O. Box | Creditor's Name | When was the debt incurred? | |
| Number | Street | As of the date you file, the claim is: Check all that apply. | |
| | | _ Contingent | |
| | | ☐ Unliquidated ☐ ☐ Disputed | |
| Kirkland | WA 98083-0788 | | |
| City Who incur | State ZIP Code red the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| ✓ Debtor | | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| | 2 only | that you did not report as priority claims | |
| □ | r 1 and Debtor 2 only st one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| ш | if this claim is for a community debt | ✓ Other. Specify | |
| _ | m subject to offset? | Credit Card | |
| No No | in subject to onset: | | |
| Yes | | | |
| 4.8 | | | \$61,570.14 |
| Retail Pro | ocess Engineers, LLC | Last 4 digits of account number | Ψ01,370.14 |
| Nonpriority C | Creditor's Name | When was the debt incurred? | |
| Number | nberfield Drive Street | As of the date you file, the claim is: Check all that apply. | |
| | | _ Contingent | |
| | | Unliquidated | |
| Land O'L | akes FL 34638 | Disputed | |
| City | State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Debtor | red the debt? Check one. | Student loans | |
| | 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| _ | 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| ш | st one of the debtors and another | ☑ Other. Specify | |
| | if this claim is for a community debt | Judgment | |
| | m subject to offset? | | |
| ✓ No ☐ Yes | | | |
| ⊔ . • • | | | |

| Debtor 1 Kevin Sterneckert | Case number (if known) | |
|--|---|-------------|
| Part 2: Your NONPRIORITY Unse | cured Claims Continuation Page | |
| After listing any entries on this page, number previous page. | them sequentially from the | Total claim |
| 4.9 | | \$0.00 |
| Synchrony Bank | Last 4 digits of account number 9 3 8 7 | |
| Nonpriority Creditor's Name PO Box 965060 | When was the debt incurred? 06/2011 | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | ☐ Contingent ☐ Unliquidated | |
| | — ☐ Disputed | |
| Orlando FL 32896 City State ZIP Code | Turns of MONDRIGHTY unaccounted eleitro | |
| Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: ☐ Student loans | |
| Debtor 1 only | ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community deb | t Charge Account | |
| Is the claim subject to offset? | | |
| ✓ No Yes | | |
| Current Account | | |
| | | |
| 4.10 | | \$0.00 |
| Usaa Federal Savings Bank Nonpriority Creditor's Name | Last 4 digits of account number 5 9 9 1 | |
| 10750 McDermott Freeway | When was the debt incurred? 01/2010 | |
| Number Street | As of the date you file, the claim is: Check all that apply. Contingent | |
| | Unliquidated | |
| San Antonio TX 78288 | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. Debtor 1 only | Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only | Debts to pension or profit-sharing plans, and other similar debts | |
| At least one of the debtors and another | Other Specify | |
| Check if this claim is for a community deb | t Credit Card | |
| Is the claim subject to offset? No | | |
| ✓ No Yes | | |

Current Account

| Debtor 1 Kevin Sterneckert | Case number (if known) | | | | | |
|---|--|--|--|--|--|--|
| Part 2: Your NONPRIORITY Unsecured Claims Continuation Page | | | | | | |
| After listing any entries on this page, number the previous page. | m sequentially from the Total claim | | | | | |
| 4.11 | \$2,133.32 | | | | | |
| Verizon | Last 4 digits of account number 0 0 0 1 | | | | | |
| Nonpriority Creditor's Name Verizon Wireless Bankruptcy Administrati | When was the debt incurred? 08/2007 | | | | | |
| Number Street 500 Tecnolgy Dr Ste 500 | As of the date you file, the claim is: Check all that apply. | | | | | |
| | _ ☐ Contingent ☐ Unliquidated ☐ ☑ Disputed | | | | | |
| Weldon Springs MO 63304 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ✓ Check if this claim is for a community debt Is the claim subject to offset? ✓ No ☐ Yes Collection | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Cellular phone service | | | | | |
| Account Closed By Grantor | | | | | | |

| Debtor 1 | Kevin Sterne | ckert | | | | | (| Case | e number (if known) |
|---------------------------|--|--------------------------------|---|---|------------------------------------|----------|------------|--------|---|
| Part 3: | List Others | to Be | Notified Ab | out a De | out a Debt That You Already Listed | | | | |
| For ex credit debts | xample, if a collector in Parts 1 or 2 | ction ag , then li Parts | ency is trying t st the collection 1 or 2, list the a | o collect fr n agency h dditional c | rom you nere. Sin reditors | for a de | ebt you d | owe to | bt that you already listed in Parts 1 or 2. to someone else, list the original nore than one creditor for any of the have additional parties to be notified for |
| Bayne, Sı | nell & Krause | | | On w | hich ent | ry in Pa | art 1 or P | art 2 | 2 did you list the original creditor? |
| Name Petroleun | | | | Line | 4.8 | of (Che | ck one): | П | Part 1: Creditors with Priority Unsecured Claims |
| Number | Street oro Dr., Suite 5 | 00 | | | | (| , | | Part 2: Creditors with Nonpriority Unsecured Claims |
| San Anto | nio | TX State | 78217 ZIP Code | —— Last | 4 digits (| of acco | unt num | ber | |
| Michael V | /. Hargett | | | On w | hich ent | ry in Pa | art 1 or P | art 2 | 2 did you list the original creditor? |
| Number | Bolt, Kirkwood of Street Shore Blvd., Ste. | | | Line | 4.8 | of (Che | ck one): | | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims |
| Tampa City | | FL State | 33606 ZIP Code | —— Last | 4 digits | of acco | unt num | ber | |
| | Loop 410, Ste. | 802 | | | | • | | | 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims |
| Number | Street | | | | | | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| San Anto | nio | TX | 78213 | — Last | 4 digits | of acco | unt num | ber | |
| City | | State | ZIP Code | | | | | | |

| Debtor 1 | Kevin Sterneckert | Case number (if known) | |
|----------|-------------------|------------------------|--|
| | | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | | | Total claim |
|--------------------------|-----|---|------------------|-------------|
| Total claims from Part 1 | 6a. | Domestic support obligations | 6a. | \$0.00 |
| nom r are r | 6b. | Taxes and certain other debts you owe the government | 6b. | \$0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | ^{6d.} + | \$3,800.00 |
| | 6e. | Total. Add lines 6a through 6d. | 6d. | \$3,800.00 |
| | | | | Total claim |
| Total claims from Part 2 | 6f. | Student loans | 6f. | \$0.00 |
| | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | ^{6i.} + | \$99,548.21 |
| | 6j. | Total. Add lines 6f through 6i. | 6j. | \$99,548.21 |

| Fill in this information to identify your case: | | | | | | | |
|---|--------------------|------------------|-----------------|---|-------------------|--|--|
| Debtor 1 | Kevin | | Sterneckert | | | | |
| | First Name | Middle Name | Last Name | _ | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | _ | | | |
| United States Bar | nkruptcy Court for | the: WESTERN DIS | STRICT OF TEXAS | _ | | | |
| Case number | | | | | ☐ Check if this i | | |
| (if known) | | | | | amended filin | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease
 is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of
 executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

| No Yes | Fi | ll in th | is information to | identify your case: | | | |
|--|------|--------------------------------|---|--|---|---|-------|
| Debtor 2 (Spouse, if filing) First Name | De | ebtor 1 | <u>Kevin</u> | | Sterneckert | | |
| Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing objective, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Ideho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No No Go to line 3. Yes No Yes Yes No Yes Yes No Yes Yes No Yes Y | | | First Name | Middle Name | Last Name | | |
| Case number ((if known) Check if this is an amended filing Check if this is an am | | | filing) First Name | Middle Name | Last Name | | |
| Official Form 106H Schedule H: Your Codebtors 12/13 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes In which community state or territory did you live? Texas Fill in the name and current address of that person. Natalie Sterneckert Name of your apouse, former spouse, or legal equivalent Notices Boerne TX 78006 City Subar 78006 City | Un | ited Sta | tes Bankruptcy Court f | or the: WESTERN DIS | TRICT OF TEXAS | | |
| Official Form 106H Schedule H: Your Codebtors Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (if you are filing a joint case, do not list either spouse as a codebtor.) No Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes In which community state or territory did you live? Natialis Sterneckert Name of your spouse, former spouse, or legal equivalent 10620 Bridlewood Trail Number Street Boerne TX 78006 City State ZiP Code 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, line Number Street Spouse Name Not Entered Name Schedule D, line Schedule O, line | | | per | | | ☐ Check if this is an | |
| Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (if you are filling a joint case, do not list either spouse as a codebtor.) No | (if | known) | | | | _ | |
| Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (if you are filling a joint case, do not list either spouse as a codebtor.) No | Off | icial F | Form 106H | | | | |
| two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) No | | | | lebtors | | | 12/15 |
| 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No. Yes. In which community state or territory did you live? Texas Fill in the name and current address of that person. Natalie Sterneckert Name of your spouse, former spouse, or legal equivalent 10620 Bridlewood Trail Number Street Boerne TX 78006 City State ZIP Code 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F, (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: 3.1 Spouse Name Not Entered Name Schedule D, line Schedule G, line | need | ded, cop e. On th Do you | by the Additional Pag- ne top of any Addition have any codebtors? | e, fill it out, and number al Pages, write your na | the entries in the boxe me and case number (if | xes on the left. Attach the Additional Page to this (if known). Answer every question. | |
| include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? No Yes In which community state or territory did you live? Natalie Sterneckert Name of your spouse, former spouse, or legal equivalent 10620 Bridlewood Trail Number Street Boerne TX 78006 City State ZIP Code 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filling with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: 3.1 Spouse Name Not Entered Name Schedule D, line Schedule G, line Schedule C, line Schedule G, line Schedule C, line Sc | | $=$ \sim | | | | | |
| Name of your spouse, former spouse, or legal equivalent 10620 Bridlewood Trail Number Street Boerne TX 78006 City State ZIP Code 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: 3.1 Spouse Name Not Entered Name V Schedule D, line Schedule G, line Schedule G, line Shapiro & Schwartz LLP | 2. | include No Ye | Arizona, California, Ida b. Go to line 3. es. Did your spouse, fo No Yes | aho, Louisiana, Nevada, ormer spouse, or legal eq | New Mexico, Puerto Rico | ico, Texas, Washington, and Wisconsin.) It the time? | |
| Boerne TX 78006 | | | | | alent | <u></u> | |
| Boerne City State ZIP Code 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: 3.1 Spouse Name Not Entered Name Schedule D, line Schedule E/F, line Schedule G, line | | | 10620 Bridlewoo | | | | |
| 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt | | | | | | | |
| 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt | | | | | | | |
| 3.1 Spouse Name Not Entered Name Schedule D, line Schedule E/F, line Schedule G, line Shapiro & Schwartz LLP | 3. | person credito Schedu | mn 1, list all of your of shown in line 2 again r on Schedule D (Offi ule D, Schedule E/F, o | n as a codebtor only if t icial Form 106D), <i>Sched</i> or Schedule G to fill out | ide your spouse as a co hat person is a guarant lule E/F (Official Form 1 | ntor or cosigner. Make sure you have listed the n 106E/F), or <i>Schedule G</i> (Official Form 106G). Use | debt |
| Name Number Street Schedule E/F, line Schedule G, line Schedule G, line Shapiro & Schwartz LLP | | | | | | Check all schedules that apply: | |
| Schedule G, line Shapiro & Schwartz LLP | 3.1 | | | ered | | Schedule D, line | |
| Schedule G, line Shapiro & Schwartz LLP | | | | | | Schedule E/F, line 1 | |
| · | | | 20. Olio6t | | | Schedule G, line | |
| City State 7ID Code | | | | | | Shapiro & Schwartz LLP | |

| Debtor 1 | Kevin Sterneckert | | | Case number (if known) |
|----------|------------------------------|-----------|----------|---|
| | Additional Page to List | More Code | btors | |
| | Column 1: Your codebtor | | | Column 2: The creditor to whom you owe the debt |
| | | | | Check all schedules that apply: |
| | Spouse Name Not Entered Name | | | — Schedule D, line |
| | Number Street | | | Schedule E/F, line |
| | | | | Schedule G, line USAA Federal Savings Bank |
| , | City | State | ZIP Code | |
| | Spouse Name Not Entered Name | | | Schedule D, line |
| | Number Street | | | Schedule E/F, line 2 |
| | | | | Schedule G, line |
| | City | State | ZIP Code | Weinstein & Riley, PS |
| | CILV | Sidle | AIF GOOD | |

| on wing date: |
|------------------|
| g aatoi |
| |
| |

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

| 1. | Fill in your employment information. If you have more than one | | Debtor 1 | | Debtor 2 or non-filing spouse | | | - | |
|----|--|--------------------|---|---|-------------------------------|---|---|-----------------------|---|
| | job, attach a separate page with information about additional employers. | ation about | | ✓ Employed✓ Not employed | | | ✓ EmployedNot employed | | |
| | | Occupation | Marketing | | | Self Employed/Photographer | | | - |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Symphony EYC | | | Photography | by Natalie | | - |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 50 Braintree Hill Office Park, Ste. 2 Number Street | | Park, Ste. 22 | 22 10620 Bridlewood Trail Number Street | | | |
| | | | Braintree City | MA State | 02184 Zip Code | Boerne City | TX State | 78006 Zip Code | _ |
| | How long employed there? 2 months | | | | | 6 years | | _ | |

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Dobtor 1

For Debtor 2 or

| | | | | non-filing spouse |
|----|---|------|-------------|-------------------|
| 2. | List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | 2. | \$25,000.00 | \$0.00 |
| 3. | Estimate and list monthly overtime pay. | 3. + | \$0.00 | \$0.00 |
| 4. | Calculate gross income. Add line 2 + line 3. | 4. | \$25,000.00 | \$0.00 |

| Deb | tor 1 | Kevin Sterneckert | | Case num | ber (if kno | wn) | | |
|-----|-----------|---|--------------|------------------------|-------------|----------------------|-----|-------------------------|
| | | | | For Debtor 1 | For Deb | tor 2 or g spouse |) | |
| | Сор | by line 4 here | 4. | \$25,000.00 | | \$0.00 | | |
| 5. | | all payroll deductions: | | | | | | |
| | | Tax, Medicare, and Social Security deductions | 5a. | \$5,498.00 | | \$0.00 | | |
| | | Mandatory contributions for retirement plans | 5b. | \$214.58 | | \$0.00 | | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$0.00 | | \$0.00 | | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$0.00 | | \$0.00 | | |
| | 5e. | Insurance | 5e. | \$859.78 | | \$0.00 | | |
| | 5f. | Domestic support obligations | 5f. | \$0.00 | | \$0.00 | | |
| | 5g. | Union dues | 5g. | \$0.00 | | \$0.00 | | |
| | 5h. | Other deductions. Specify: See continuation sheet | 5h. + | \$114.36 | | \$0.00 | | |
| 6. | | I the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5h. | 6. | \$6,686.72 | | \$0.00 | | |
| 7. | Cald | Subtract line 6 from line 4. | 7. | \$18,313.28 | | \$0.00 | | |
| 8. | List | all other income regularly received: | | | | | | |
| | 8a. | Net income from rental property and from operating a business, profession, or farm | 8a. | (\$376.42) | | \$0.00 | | |
| | | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | | | | | | |
| | 8b. | Interest and dividends | 8b. | \$0.00 | | \$0.00 | | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive | 8c. | \$0.00 | | \$0.00 | | |
| | | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | | | | | |
| | 8d. | Unemployment compensation | 8d. | \$0.00 | | \$0.00 | | |
| | 8e. | Social Security | 8e. | \$0.00 | | \$0.00 | | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | | |
| | | Specify: | 8f. | \$0.00 | | \$0.00 | | |
| | 8g. | Pension or retirement income | 8g. | \$0.00 | | \$0.00 | | |
| | 8h. | Other monthly income. | O.L. | | | | | |
| | | Specify: See continuation sheet | 8h. 🛖 | \$3,333.33 | | \$0.00 | | |
| 9. | Add | l all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. | 9. | \$2,956.91 | | \$0.00 | | |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$21,270.19 | • | \$0.00 |]=[| \$21,270.19 |
| 11. | | e all other regular contributions to the expenses that you list in So | chedu | le J. | | | | |
| | Inclu | ude contributions from an unmarried partner, members of your househ ds or relatives. | | | roommate | es, and ot | ner | |
| | Do r | not include any amounts already included in lines 2-10 or amounts that | t are n | ot available to pay ex | kpenses li | sted in Sc | hed | ule J. |
| | Spe | cify: | | | | 11. | + | \$0.00 |
| 12. | | I the amount in the last column of line 10 to the amount in line 11. me. Write that amount on the Summary of Your Assets and Liabilities | | | | 12. | | \$21,270.19 |
| 12 | | applies. | sia far | ·m2 | | | | Combined monthly income |
| ıð. | טס (| you expect an increase or decrease within the year after you file the | | | | | | |
| | \square | No. Yes. Explain: Overtime includes Bonus, Commission and G | en In | c. Plan amounts | | | | |
| | | | | | | | | |

| Debt | or 1 Kevin Sterneckert | Case number (if known) | |
|------|--------------------------------------|--|--|
| 5h. | Other Payroll Deductions (details) | For Debtor 1 For Debtor 2 or non-filing spouse | |
| | Accident | \$11.18 | |
| | ADD | \$3.32 | |
| | Child Life | \$3.90 | |
| | Dental | \$52.96 | |
| | Emp Life | \$33.30 | |
| | Spouse Life | \$3.70 | |
| | Vision | \$6.00 | |
| | | Totals: \$114.36 \$0.00 | |
| Oh | Other Monthly Income (details) | For Debtor 1 For Debtor 2 or non-filing spouse | |
| | Other Monthly Income (details) Intel | \$2,500.00 | |
| | Fresh Encounter | \$833.33 | |
| | | Totals: \$3,333.33 \$0.00 | |

| Debtor 1 Kevin Sterneckert | | Case number (if known) | |
|-----------------------------------|-----------------|------------------------|------------|
| 8a. Attached Statement (Debtor 1) | | | |
| Gross Monthly Income: | | | \$9,203.50 |
| Expense | Category | <u>Amount</u> | |
| Salaries/wages | Salaries | \$4,800.00 | |
| Rent | Rent | \$1,219.00 | |
| Office Supplies | Supplies | \$441.08 | |
| Utilities | Utilities | \$264.67 | |
| Insurance | Insurance | \$79.00 | |
| Travel | Travel | \$135.67 | |
| Maintenance | Maintenance | \$37.50 | |
| Advertising | Advertising | \$1,952.83 | |
| Computer Programs | Programs | \$44.00 | |
| Bank Fees | Bank Fees | \$106.42 | |
| Meals | Meals | \$11.75 | |
| Security System | Security System | \$39.00 | |
| Payroll Tax | Taxes | \$449.00 | |
| Total Monthly Expenses | | | \$9,579.92 |
| Net Monthly Income: | | | (\$376.42) |

| G | ill in this inform | ation to ide | ntify y | our case: | | | Oh a | -1. :£ 41-:- | . : | |
|-----|---|----------------------------------|---------------------|-----------------------------------|-------------|---|-------------|----------------------|-----------------------------|----------------------------|
| | Debtor 1 | Kevin | | | Stern | eckert | ■ Che | ck if this An ame | s is: ended filing | |
| | 202101 | First Name | | Middle Name | Last Na | | \parallel | A supp | lement showing | |
| | Debtor 2 (Spouse, if filing) | First Name | | Middle Name | Last Na | me | | | r 13 expenses a ng date: | s of the |
| | United States Bankru | intev Court for | the· V | VESTERN DIST | RICT OF | TEXAS | | 1414/5 | D (2000) | |
| | Case number | apicy Court for | uio. <u>•</u> | VEGTERN DIGT | INIOT OI | ILXAO | | MM / D | D / YYYY | |
| | (if known) | | | | | | | | | |
| 0 | fficial Form 10 | <u>6J</u> | | | | | | | | |
| S | chedule J: Yo | ur Expens | ses | | | | | | | 12/1 |
| nai | rrect information. If me and case numbe | more space is r (if known). A | neede Answer | d, attach another every question. | - | ing together, both ar his form. On the top | | - | | |
| L | Part 1: Descri | be Your Hou | useho | ld | | | | | | |
| 1. | Is this a joint case | ? | | | | | | | | |
| | □ No □ Yes | ebtor 2 live in a | | ate household? | 2, Expenses | s for Separate Housel | hold of | f Debtor | 2. | |
| 2. | Do you have depe | | □ No √ Ye | s. Fill out this info | ormation | Dependent's relati | | p to | Dependent's | Does dependen |
| | Do not list Debtor 1 Debtor 2. | and | | each dependent. | | Son | r 2 | | age 12 | live with you? No |
| | Do not state the de names. | pendents' | | | | | | | | - ☑ Yes □ No - □ Yes |
| | | | | | | | | | | □ No |
| | | | | | | | | | | - □ Yes □ No |
| | | | | | | | | | | Yes |
| | | | | | | | | | | □ No |
| 3. | Do your expenses expenses of peop yourself and your | le other than | <u> </u> | ☑ No ☐ Yes | | | | | | - □ Yes |
| G | Part 2: Estima | te Your Onç | going | Monthly Expe | enses | | | | | |
| to | | of a date after | the bar | | | re using this form as supplemental Sche | | | | |
| | clude expenses paid ch assistance and h | | • | | • | | | | Your expens | ses |
| 4. | The rental or hom Include first mortga | | | | | | | | 4 | |
| | If not included in I | line 4: | | | | | | | | |
| | 4a. Real estate ta | xes | | | | | | | 4a | |
| | 4b. Property, hom | eowner's, or re | nter's in | surance | | | | | 4b | |
| | 4c. Home mainter | nance, repair, a | nd upke | eep expenses | | | | | 4c | \$150.00 |
| | 4d Homeowner's | association or | condor | ninium dues | | | | | 4d | \$100.00 |

| Deb | tor 1 Kevin Sterneckert Case | number (if known) | |
|-----|---|-------------------|----------|
| | | Your exper | ises |
| 5. | Additional mortgage payments for your residence, such as home equity loans | 5 | |
| 6. | Utilities: | | |
| | 6a. Electricity, heat, natural gas | 6a | \$564.00 |
| | 6b. Water, sewer, garbage collection | 6b | \$225.00 |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$250.00 |
| | 6d. Other. Specify: Cellular phones | 6d | \$185.00 |
| 7. | Food and housekeeping supplies | 7. | \$800.00 |
| 8. | Childcare and children's education costs | 8. | |
| 9. | Clothing, laundry, and dry cleaning (See continuation sheet(s) for | details) 9. | \$375.00 |
| 10. | Personal care products and services | 10. | \$100.00 |
| 11. | Medical and dental expenses | 11. | \$150.00 |
| 12. | Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$625.00 |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$300.00 |
| 14. | Charitable contributions and religious donations | 14 | |
| 15. | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| | 15a. Life insurance | 15a | |
| | 15b. Health insurance | 15b | |
| | 15c. Vehicle insurance | 15c | \$124.00 |
| | 15d. Other insurance. Specify: | 15d. | |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16. | |
| 17. | Installment or lease payments: | | |
| | 17a. Car payments for Vehicle 1 | 17a. | |
| | 17b. Car payments for Vehicle 2 | 17b. | |
| | 17c. Other. Specify: | 17c | |
| | 17d. Other. Specify: | 17d. | |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | |
| 19. | Other payments you make to support others who do not live with you. Specify: | 19. | |

| Debtor 1 | | Kevin Sterneckert | Case number (if known) | |
|----------|------------|--|------------------------|-------------|
| 20. | | r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income. | | |
| | 20a. | Mortgages on other property | 20a | |
| | 20b. | Real estate taxes | 20b | |
| | 20c. | Property, homeowner's, or renter's insurance | 20c | |
| | 20d. | Maintenance, repair, and upkeep expenses | 20d | |
| | 20e. | Homeowner's association or condominium dues | 20e | |
| 21. | Other | r. Specify: See continuation sheet | 21. + | \$275.96 |
| 22. | Calcu | ulate your monthly expenses. | | |
| | 22a. | Add lines 4 through 21. | 22a. | \$4,223.96 |
| | 22b. | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. | . 22b | |
| | 22c. | Add line 22a and 22b. The result is your monthly expenses. | 22c | \$4,223.96 |
| 23. | Calcu | ulate your monthly net income. | | |
| | 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a | \$21,270.19 |
| | 23b. | Copy your monthly expenses from line 22c above. | 23b. _ _ | \$4,223.96 |
| | 23c. | Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c | \$17,046.23 |
| 24. | Do yo | ou expect an increase or decrease in your expenses within the year after you | u file this form? | |
| | | xample, do you expect to finish paying for your car loan within the year or do you ent to increase or decrease because of a modification to the terms of your mortga | . , | |
| | 7 1 | No. | | |
| | □ ` | Yes. Explain here: None. | | |
| | | | | |
| | | | | |

| Deb | ebtor 1 Kevin Sterneckert | Case number (if know | /n) |
|-----|--|----------------------|----------|
| 9. | Clothing, laundry, and dry cleaning (details): | | \$250.00 |
| | Laundry/dry cleaning | | \$125.00 |
| | | Total: | \$375.00 |
| | . Other. Specify: Pet Care | | \$150.00 |
| | Rounding factor | | \$0.96 |
| | School Lunches | | \$125.00 |
| | | Total: | \$275.96 |

| Debtor 1 | Kevin | | Sterneckert | |
|--|------------|-------------|-------------|--------------------|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| Case Hullibel | | | | Check if this is a |
| | | | | amended filing |
| Case number (if known) Official Form | 106Sum | | | amended filing |

| | | Your assets Value of what you own |
|-----|--|--------------------------------------|
| • | Schedule A/B: Property (Official Form 106A/B) | ¢4 070 000 0 |
| | 1a. Copy line 55, Total real estate, from Schedule A/B | \$1,078,800.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$100,357.9 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$1,179,157.9 |
| Pa | rt 2: Summarize Your Liabilities | |
| | | Your liabilities Amount you owe |
| | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$1,011,661.8 |
| | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$3,800.0 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | + \$99,548.2 |
| | Your total liabilities | \$1,115,010.0 |
| o a | rt 3: Summarize Your Income and Expenses | |
| | Schedule I: Your Income (Official Form 106I) | \$21,270.1 |
| | Copy your combined monthly income from line 12 of Schedule I | |
| | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$4,223.9 |

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| Del | otor 1 | Kevin Sterneckert Case | e number (if known) |
|-----|-------------------------|--|---|
| P | art 4 | Answer These Questions for Administrative and Statistical I | Records |
| 6. | Are | you filing for bankruptcy under Chapters 7, 11, or 13? | |
| | | No. You have nothing to report on this part of the form. Check this box and submit Yes | this form to the court with your other schedules. |
| 7. | Wha | at kind of debt do you have? | |
| | $\overline{\mathbf{A}}$ | Your debts are primarily consumer debts. Consumer debts are those "incurred family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical | |
| | | Your debts are not primarily consumer debts. You have nothing to report on this this form to the court with your other schedules. | s part of the form. Check this box and submit |
| 3. | | m the Statement of Your Current Monthly Income: Copy your total current monthly cial Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. | y income from \$35,235.17 |
|). | Сор | by the following special categories of claims from Part 4, line 6 of Schedule E/F. | : |
| | | | Total claim |
| | Fro | m Part 4 on <i>Schedule E/F,</i> copy the following: | |
| | 9a. | Domestic support obligations. (Copy line 6a.) | \$0.00 |
| | 9b. | Taxes and certain other debts you owe the government. (Copy line 6b.) | \$0.00 |
| | 9c. | Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | <u>\$0.00</u> |
| | 9d. | Student loans. (Copy line 6f.) | \$0.00_ |
| | 9e. | Obligations arising out of a separation agreement or divorce that you did not report priority claims. (Copy line 6g.) | as \$0.00 |
| | 9f. | Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$0.00 |
| | 9g. | Total. Add lines 9a through 9f. | \$0.00 |

| Fill in this info | ormation to i | dentify your case | : | | |
|---|---------------------|-------------------|-----------------------|---|--|
| Debtor 1 | Kevin First Name | Middle Name | Sterneckert Last Name | _ | |
| Debtor 2 (Spouse, if filing) | | Middle Name | Last Name | _ | |
| United States Bankruptcy Court for the: WESTERN DISTRICT OF TEXAS | | | | | |
| Case number (if known) Check if this is an amended filing | | | | | |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | | | | | |
|--|--|--|--|--|--|
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | |
| ☑ No | | | | | |
| Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | |
| | | | | | |
| Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. | | | | | |
| | | | | | |
| X /s/ Kevin Sterneckert | X | | | | |
| Kevin Sterneckert, Debtor 1 | Signature of Debtor 2 | | | | |
| Date <u>07/31/2020</u> | Date | | | | |
| MM / DD / YYYY | MM / DD / YYYY | | | | |

| Fill in this info | ormation to i | dontify your case | | | |
|--|------------------------|----------------------------|---|--|-------|
| | | identity your case. | | | |
| Debtor 1 | Kevin | | Sterneckert | | |
| Debter 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Bar | nkruptcy Court fo | or the: WESTERN DIS | STRICT OF TEXAS | | |
| Case number (if known) | | | | Check if this is an amended filing | |
| Official Form | 107 | | | | |
| | | l Affaina fan load | ividuala Filina fan Dav | .l | 0.4/4 |
| Statement o | T Financia | Attairs for ind | ividuals Filing for Bar | ikruptcy | 04/19 |
| your name and ca | se number (if k | nown). Answer every | • | the top of any additional pages, write | |
| | | | | | |
| 1. What is your of Married ☐ Not married | current marital | status? | | | |
| ✓ Married ☐ Not marrie 2. During the last | ed | | ther than where you live now? | | |
| ✓ Married ☐ Not marrie 2. During the las ✓ No | ed st 3 years, have | you lived anywhere o | ther than where you live now? ears. Do not include where you liv | e now. | |

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

| Debtor 1 | Kevin Sterneckert | Case number (if known) | | | | | |
|---|--|--|--|--|--|--|--|
| Part 2: | Explain the Sources of | our Income | | | | | |
| Fill in t If you a ☐ No | to have any income from employs the total amount of income you receare filing a joint case and you have as. Fill in the details. | eived from all jobs and all bu | ısinesses, including par | t-time activities. | lendar years? | | |
| V | | Debtor 1 | | Debtor 2 | | | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions | Sources of income Check all that apply. | Gross income (before deductions and exclusions | | |
| | ary 1 of the current year until u filed for bankruptcy: | ✓ Wages, commissions, bonuses, tips☐ Operating a business | \$187,500.00 | ☐ Wages, commissions, bonuses, tips☐ Operating a business | | | |
| | t calendar year: to December 31, 2019) | ✓ Wages, commissions, bonuses, tips☐ Operating a business | \$396,704.00 | ☐ Wages, commissions, bonuses, tips ☐ Operating a business | | | |
| For the calendar year before that: (January 1 to December 31, 2018) YYYYY | | ✓ Wages, commissions, bonuses, tips☐ Operating a business | \$391,594.38 | ☐ Wages, commissions, bonuses, tips☐ Operating a business | | | |
| | | Debtor 1 | | Debtor 2 | | | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions | Sources of income Check all that apply. | Gross income (before deductions and exclusions | | |
| | ary 1 of the current year until u filed for bankruptcy: | ✓ Wages, commissions, bonuses, tips☐ Operating a business | \$20,000.00 | ☐ Wages, commissions, bonuses, tips ☐ Operating a business | | | |
| | t calendar year: to December 31, 2019) | Wages, commissions, bonuses, tips□ Operating a business | | ☐ Wages, commissions, bonuses, tips☐ Operating a business | | | |
| | endar year before that: to December 31, 2018) | ☐ Wages, commissions, bonuses, tips☐ Operating a business | | ☐ Wages, commissions, bonuses, tips ☐ Operating a business | | | |

| Debtor 1 | Kevin Sterneckert | Case number (if known) | | | | |
|----------------------|--|--|--|--------------------------------------|--|--|
| Inclu uner and | you receive any other income during the income regardless of whether the apployment; and other public benefit and gambling and lottery winnings. If you tor 1. | alimony; child support; Sods; money collected from | lawsuits; royalties; | | | |
| List | each source and the gross income fr | om each source separately | v. Do not include income | that you listed in line 4. | | |
| | No Yes. Fill in the details. | | | | | |
| | | Debtor 1 | | Debtor 2 | | |
| | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions | Sources of income Describe below. | Gross income from each source (before deductions and exclusions | |
| | nuary 1 of the current year until you filed for bankruptcy: | | \$0.00 | | | |
| | ast calendar year: 1 to December 31, 2019 | rental | (\$58,948.00) | | | |
| | alendar year before that: 1 to December 31, 2018) | rental | (\$58,571.00) | | | |
| (50301) | YYYY YYYY | | | | | |

| Deb | otor 1 | Kevin Sterneckert Case number (if known) | | | | |
|-----|--|---|--|--|--|--|
| Р | art 3: | List Certain Payments You Made Before You Filed for Bankruptcy | | | | |
| 6. | Are eith | er Debtor 1's or Debtor 2's debts primarily consumer debts? | | | | |
| | □ No. | Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." | | | | |
| | | During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more? | | | | |
| | | ☐ No. Go to line 7. | | | | |
| | | Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. | | | | |
| | | * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. | | | | |
| | ✓ Yes. | Debtor 1 or Debtor 2 or both have primarily consumer debts. | | | | |
| | | During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? | | | | |
| | | ☑ No. Go to line 7. | | | | |
| | | Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. | | | | |
| 7. | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony. | | | | | |
| | ✓ No ☐ Yes. | List all payments to an insider. | | | | |
| 8. | | year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that d an insider? | | | | |
| | Include | payments on debts guaranteed or cosigned by an insider. | | | | |
| | ✓ No ☐ Yes. | List all payments that benefited an insider. | | | | |
| Р | art 4: | Identify Legal Actions, Repossessions, and Foreclosures | | | | |
| 9. | List all s | year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? uch matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody tions, and contract disputes. | | | | |
| | ✓ No ☐ Yes. | . Fill in the details. | | | | |

| Deb | otor 1 | Kevin Sterneckert | | | Case number (if known) | | |
|------|----------------------|---|-----------------|---|------------------------|------------------|-----------------------------------|
| 10. | seized, | in 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, ed, or levied? ck all that apply and fill in the details below. | | | | | |
| | | Go to line 11. Fill in the information below. | | | | | |
| | eMain | | | Describe the property 2007 Ford F-150 | | Date 10/24/19 | Value of the property \$11,000.00 |
| | chnage l | Plaza Shopping Center | | Explain what happened | | | |
| | 9 NW L | oop 410 Ste. 170 | 3238-2500 | Property was repossessedProperty was foreclosed.Property was garnished. | | | |
| City | Antoni | | Code | Property was attached, sei | zed, or levied. | | |
| 11. | | 90 days before you filed for ba is from your accounts or refus | | | | stitution, set o | ff any |
| | ✓ No ☐ Yes | . Fill in the details. | | | | | |
| 12. | | I year before you filed for banl rs, a court-appointed receiver, | | | possession of an | assignee for th | ne benefit of |
| | ☑ No ☐ Yes | | | | | | |
| P | art 5: | List Certain Gifts and (| Contributi | ions | | | |
| 13. | Within 2 | 2 years before you filed for bar | nkruptcy, di | id you give any gifts with a to | tal value of more t | han \$600 per p | person? |
| | ✓ No ☐ Yes | . Fill in the details for each gift. | | | | | |
| 14. | Within 2 to any o | 2 years before you filed for bar charity? | nkruptcy, di | id you give any gifts or contri | butions with a tota | al value of mor | e than \$600 |
| | ✓ No ☐ Yes | . Fill in the details for each gift of | or contribution | on. | | | |
| P | art 6: | List Certain Losses | | | | | |
| 15. | | I year before you filed for bank saster, or gambling? | kruptcy or s | since you filed for bankruptcy | , did you lose any | thing because | of theft, fire, |
| | ✓ No ☐ Yes | . Fill in the details. | | | | | |

| Debtor 1 Kevin Sterneckert | | | rnecke | rt | Case number (if known) | | | |
|----------------------------|------------------------------|------------------|-------------|------------------|---|---------------------|---|-------------------|
| Р | art 7: | List Cer | tain Pa | ayments or | Transfers | | | |
| 16. | | - | - | | otcy, did you or anyone else acting on y kruptcy or preparing a bankruptcy peti | | or transfer any prop | perty to |
| | Include | any attorney | s, bankr | uptcy petition p | reparers, or credit counseling agencies fo | r services require | ed for your bankrupto | cy. |
| | □ No ☑ Yes | s. Fill in the | details. | | | | | |
| | v Office son Who W | of Magdal | ena Go | onzales | Description and value of any property Attonrey fee, filing fee, credit repo counseling and financial mangem | ort and credit | Date payment or transfer was made | Amount of payment |
| 293 | 39 Moss | rock, Ste. | 130 | | 3 | | 7/31/2020 | \$1,000.00 |
| | nber Stre | | | | - | | | , |
| | | | | | - | | | |
| Sar | n Antoni | io | TX | 78230 | | | | |
| City | | | State | ZIP Code | - | | | |
| Ema | ail or websit | te address | | | - | | | |
| | | | | | | | | |
| Pers | on Who M | lade the Payme | ent, if Not | You | | | | |
| 17. | | - | - | | otcy, did you or anyone else acting on y rith your creditors or to make payments | | | perty to |
| | Do not i | nclude any p | ayment | or transfer that | you listed on line 16. | | | |
| | ✓ No ☐ Yes | s. Fill in the | details. | | | | | |
| 18. | | • | • | | uptcy, did you sell, trade, or otherwise t se of your business or financial affairs? | | perty to anyone, ot | her than |
| | | _ | | | s made as security (such as granting of a save already listed on this statement. | security interest o | or mortgage on your | property). |
| | ✓ No ☐ Yes | s. Fill in the o | details. | | | | | |
| 19. | | - | - | | ruptcy, did you transfer any property to called asset-protection devices.) | a self-settled tr | ust or similar devic | e of which |
| | ✓ No ☐ Yes | s. Fill in the | details. | | | | | |

| Deb | otor 1 | Kevin Sterneckert | Case number (if known) |
|-----|-----------------|---|--|
| P | art 8: | List Certain Financial Accounts, Instruments, Safe Depo | sit Boxes, and Storage Units |
| 20. | | 1 year before you filed for bankruptcy, were any financial accounts or in , closed, sold, moved, or transferred? | nstruments held in your name, or for your |
| | | checking, savings, money market, or other financial accounts; certificates o, pension funds, cooperatives, associations, and other financial institutions. | f deposit; shares in banks, credit unions, brokerage |
| | ✓ No ☐ Yes | s. Fill in the details. | |
| 21. | - | now have, or did you have within 1 year before you filed for bankruptc urities, cash, or other valuables? | , any safe deposit box or other depository |
| | ✓ No ☐ Yes | s. Fill in the details. | |
| 22. | √ No | ou stored property in a storage unit or place other than your home with s. Fill in the details. | in 1 year before you filed for bankruptcy? |
| Р | art 9: | Identify Property You Hold or Control for Someone Else | |
| 23. | - | hold or control any property that someone else owns? Include any proint rust for someone. | operty you borrowed from, are storing for, |
| | ✓ No ☐ Yes | s. Fill in the details. | |
| Р | art 10: | Give Details About Environmental Information | |
| For | the purp | pose of Part 10, the following definitions apply: | |
| | hazardou | mental law means any federal, state, or local statute or regulation conce us or toxic substance, wastes, or material into the air, land, soil, surface g statutes or regulations controlling the cleanup of these substances, w | water, groundwater, or other medium, |
| | | ns any location, facility, or property as defined under any environmenta or used to own, operate, or utilize it, including disposal sites. | al law, whether you now own, operate, or |
| | | us material means anything an environmental law defines as a hazardo ce, hazardous material, pollutant, contaminant, or similar item. | us waste, hazardous substance, toxic |
| Rep | oort all ne | otices, releases, and proceedings that you know about, regardless of w | hen they occurred. |
| 24. | Has any law? | y governmental unit notified you that you may be liable or potentially lia | ble under or in violation of an environmental |
| | ✓ No ☐ Yes | s. Fill in the details. | |
| 25. | - | ou notified any governmental unit of any release of hazardous material? | , |
| | ✓ No ☐ Yes | s. Fill in the details. | |

 $20\text{-}51355\text{-}cag \;\; \mathsf{Doc\#1} \;\; \mathsf{Filed} \;\; 07/31/20 \;\; \mathsf{Entered} \;\; 07/31/20 \;\; \mathsf{12:20:21} \;\; \mathsf{Main} \;\; \mathsf{Document} \;\; \mathsf{Pg} \;\; \mathsf{54} \;\; \mathsf{of} \;\; \mathsf{75}$

| Deb | otor 1 | Kevin Sterneckert | | | Case number (if known) | | | |
|------------|------------------|--|--|-------------------------------|--|--|--|--|
| 26. | Have y | | u been a party in any judicial or administrative proceeding under any environmental law? Include settlements and | | | | | |
| | ✓ No | o es. Fill in the details. | | | | | | |
| Р | art 11: | Give Details About Y | our Business | or Connections to A | Any Business | | | |
| 27. | Withir busin | | eankruptcy, did y | ou own a business or ha | ave any of the following connections to any | | | |
| |]]]] | A sole proprietor or self-emp A member of a limited liabilit A partner in a partnership An officer, director, or manada An owner of at least 5% of the | y company (LLC) | or limited liability partners | ship (LLP) | | | |
| | لت ا | o. None of the above applies. | | | | | | |
| | ☐ Ye | es. Check all that apply above | and fill in the detai | s below for each busines | SS. | | | |
| 28. | | n 2 years before you filed for k ancial institutions, creditors, o | | ou give a financial state | ment to anyone about your business? Include | | | |
| | □ No | o es. Fill in the details below. | | | | | | |
| Р | art 12 | Sign Below | | | | | | |
| tha pro | t answe | ers are true and correct. I und | erstand that mak ankruptcy case o | ing a false statement, co | nts, and I declare under penalty of perjury oncealing property, or obtaining money or \$250,000, or imprisonment for up to 20 years, | | | |
| X | /s/ Kev | rin Sterneckert | Х | | | | | |
| | | terneckert, Debtor 1 | | Signature of Debtor 2 | | | | |
| | Date _ | 07/31/2020 | I | Date | | | | |
| Did | you att | tach additional pages to Your | Statement of Fina | ancial Affairs for Individ | uals Filing for Bankruptcy (Official Form 107)? | | | |
| _ | No Yes | | | | | | | |
| Did | you pa | y or agree to pay someone w | ho is not an attor | ney to help you fill out b | pankruptcy forms? | | | |
| | No Yes. N | lame of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| + | \$75 | filing fee administrative fee trustee surcharge |
|---|-------|---|
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| + | | filing fee administrative fee |
|---|---------|----------------------------------|
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee \$75 administrative fee

\$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF TEXAS SAN ANTONIO DIVISION

IN RE: Kevin Sterneckert CASE NO

CHAPTER 13

DISCLOSURE OF COMPENSATION UNDER 11 U.S.C. § 329 AND B.R. 2016(B)

Amount paid: \$1,000.00

Amount to be paid through the plan: \$3,800.00

Amount to be paid outside the plan:

Property transferred to attorney: None

Collateral held by attorney: None

Source of compensation: Current wages

I certify that I am the attorney for the above named debtor, and that the compensation paid or agreed to be paid to me for services rendered or to be rendered on behalf of the Debtor in or in connection with a case under Title 11 of the United States Code, such payment or agreement having been made after one year before the date of filing of the petition, is as indicated above.

I further certify that the Debtor has been informed and has agreed that the compensation paid shall include the following legal services: (a) All conferences with the Debtor; (b) Preparation of Petition and Schedules; (c) Attendance at 341 First Meeting and attendance at reaffirmation and/or confirmation hearings; (d) Preparation of routine motions.

I have not agreed to share this compensation with any person other than members of the firm.

Bar No. 00787558

| Date 7/31/2020 | /s/ Kevin Sterneckert |
|------------------------|-----------------------|
| | Kevin Sterneckert |
| | |
| | |
| /s/ Magdalena Gonzales | |

Magdalena Gonzales Law Office of Magdalena Gonzales 2939 Mossrock, Ste. 130

San Antonio, Texas 78230

Phone: (210) 530-5002 / Fax: (210) 530-5004

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF TEXAS SAN ANTONIO DIVISION

IN RE: Kevin Sterneckert CASE NO

CHAPTER 13

VERIFICATION OF CREDITOR MATRIX

| | The above n | amed Debtor | hereby verifies | that the attac | hed list of cred | ditors is true and | I correct to the | best of his/her |
|------|-------------|-------------|-----------------|----------------|------------------|--------------------|------------------|-----------------|
| know | rledge. | | | | | | | |

| Date _ | 7/31/2020 | Signature | /s/ Kevin Sterneckert |
|--------|-----------|-----------|-----------------------|
| | | | Kevin Sterneckert |
| | | | |
| | | | |
| Date | | Signature | |
| Dale _ | | Signature | |

Albert Uresti, MPA Bexar Co. Assessor/Collector P.O. Box 839950 San Antonio, TX 78283-3950

American Express PO Box 6618 Omaha, NE 68105-0618

Attorney General of the U.S. Department of Justice 950 Pensylvania Ave. NW Washington, D.C. 20530-0001

Bayne, Snell & Krause Petroleum Tower 8626 Tesoro Dr., Suite 500 San Antonio, TX 78217

Best Buy PO Box 60148 City of Industry, CA 91716-0148

Capital One PO Box 85015 Richmond, VA. 23285-5015

Cavalry Portfolio Services ATTN: Bankruptcy Department 500 Summit Lake Ste 400 Valhalla, NY 10595

Charlesworth Pool Maintenance dba Boerne Pool Maint. & Supplies 12245 S. Main St. Boerne, TX 78006

Credit Collection Service PO Box 773 Needham, MA 02494 Ford Motor Credit National Bankruptcy Service Center P.O. Box 6275 Dearborn, MI 48121

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Internal Revenue Service 300 E. 8th St. STOP5026AUS Special Procedures Branch Austin, TX 78701

Law Office of Magdalena Gonzales 2939 Mossrock, Ste. 130 San Antonio, Texas 78230

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Michael V. Hargett Barnett, Bolt, Kirkwood et al 601 Bayshore Blvd., Ste. 700 Tampa, FL 33606

Quantum3 Group LLC P.O. Box 788 Kirkland, WA 98083-0788

Retail Process Engineers, LLC 20537 Amberfield Drive Land O'Lakes, FL 34638

Select Portfolio Servicing, Inc PO Box 65250 Salt Lake City, UT 84165 Shapiro & Schwartz LLP 5450 NW Central, Ste. 307 Houston, Tx. 77092

Synchrony Bank PO Box 965060 Orlando, FL 32896

U.S. Attorney General 601 N.W. Loop 410, Suite 600 San Antonio, TX. 78216

U.S. Trustee PO Box 1539 San Antonio, TX. 78295-1539

USAA Federal Savings Bank 10750 McDermott Freeway San Antonio, TX 78288

Verizon Verizon Wireless Bankruptcy Administrati 500 Tecnolgy Dr Ste 500 Weldon Springs, MO 63304

Villa & White, LLP 1100 NW Loop 410, Ste. 802 San Antonio, TX 78213

Weinstein & Riley, PS 6785-4 S. Eastern Ave. las Vegas, NV 89119

| Fill in this | information to i | dentify your case: | | Check as | directed in lines 1 | 7 and 21: |
|---------------------------------------|--|--|--|--|--|-------------------------------|
| Debtor 1 | Kevin First Name | Middle Name | Sterneckert Last Name | According to Statement: | the calculations require | d by this |
| Debtor 2 Spouse, if fili | ng) First Name | Middle Name | Last Name | | able income is not detern 1 U.S.C. § 1325(b)(3). | mined |
| | | or the: WESTERN DIST | RICT OF TEXAS | | able income is determine 1 U.S.C. § 1325(b)(3). | ∍d |
| Case number | | | | 3. The cor | nmitment period is 3 yea | ars. |
| if known) | | | | 4. The cor | nmitment period is 5 yea | ars. |
| fficial Fo | rm 122C-1 | | | Check if t | his is an amended filing | ı |
| hapter 1 | 3 Statement | of Your Current nmitment Period | Monthly Income | | | 04 |
| | | | people are filing together et to this form. Include the | | | |
| | • | • | write your name and case | | | |
| Part 1: | Calculate Your | Average Monthly In | come | | | |
| What is yo | our marital and filin | g status? Check one on | ly. | | | |
| ☐ Not n | narried. Fill out Colu | ımn A, lines 2-11. | | | | |
| Marri | ied. Fill out both Col | umns A and B, lines 2-11 | l. | | | |
| bankrupto August 31 in the resu | cy case. 11 U.S.C. If the amount of your lit. Do not include an | § 101(10A). For example our monthly income varied amount more to | from all sources, derived e, if you are filing on Septer d during the 6 months, add han once. For example, if live nothing to report for any | nber 15, the 6-mon the income for all 6 both spouses own t | th period would be Marc months and divide the the same rental property | ch 1 through total by 6. I |
| | | | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | |
| _ | s wages, salary, tip payroll deductions). | os, bonuses, overtime, a | and commissions | \$25,000.00 | \$0.00 | 1 |
| Alimony a | and maintenance pa | nyments. Do not include | payments from a spouse. | \$0.00 | \$0.00 | |
| expenses regular cor your deper | of you or your dep ntributions from an undents, parents, and | e which are regularly pai endents, including child nmarried partner, membe roommates. Do not inclu- ents you listed on line 3. | \$0.00 | \$0.00 | | |
| Net incom | ne from operating a | business, profession, o | or farm | | | |
| | | Debtor 1 | Debtor 2 | | | |
| Gross rece | eipts (before all | \$0.00 | \$10,235.17 | | | |

profession, or farm

deductions)

Ordinary and necessary operating -___

Net monthly income from a business,

\$0.00

\$10,235.17 here ->

Сору

\$0.00

\$10,235.17

\$0.00 —

\$0.00

Debtor 1 **Kevin Sterneckert** Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse Net income from rental and other real property Debtor 2 Debtor 1 \$0.00 \$0.00 Gross receipts (before all deductions) \$0.00 \$0.00 Ordinary and necessary operating expenses Copy \$0.00 \$0.00 \$0.00 \$0.00 Net monthly income from rental or here other real property Interest, dividends, and royalties \$0.00 \$0.00 Unemployment compensation \$0.00 \$0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \$0.00 For you..... \$0.00 For your spouse..... Pension or retirement income. Do not include any amount received that \$0.00 \$0.00 was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. \$25,000.00 \$10,235.17 \$35,235.17 Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** \$35,235.17 12. Copy your total average monthly income from line 11.

| Deb | tor 1 | Kevin Sterneckert Case number (if known) | |
|-----|-------|--|----------------------|
| 13. | Calc | culate the marital adjustment. Check one: | |
| | | You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. | |
| 4.4 | V | | \$0.00 635,235.17 |
| | | r current monthly income. Subtract the total in line 13 from line 12. culate your current monthly income for the year. Follow these steps: | 335,233.17 |
| 15. | | | 35,235.17 |
| | 100. | Multiply line 15a by 12 (the number of months in a year). | 12 |
| | 15b. | | 122,822.04 |
| 16. | | culate the median family income that applies to you. Follow these steps: | |
| | | Fill in the state in which you live. | |
| | 16b. | Fill in the number of people in your household. | |
| | 16c. | Fill in the median family income for your state and size of household | 573,948.00 |
| 17. | How | do the lines compare? | |
| | 17a. | under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 12 | 22C-2). |
| | 17b. | Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, <i>Disposable income is determined und 11 U.S.C.</i> § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. | der |
| Pa | art 3 | Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) | |
| 18. | Сор | y your total average monthly income from line 11. | 35,235.17 |
| 19. | that | uct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's me, copy the amount from line 13. | |
| | 19a. | If the marital adjustment does not apply, fill in 0 on line 19a. | \$0.00 |
| | 19b. | Subtract line 19a from line 18. | 35,235.17 |

| Deb | tor 1 | Kevin Sterneckert | Case number (if known) | | | | | |
|-----|--|---|--|----------|-----------|--|--|--|
| 20. | Cald | culate your current monthly income for the year. | Follow these steps: | | | | | |
| | 20a | Copy line 19b | | \$3 | 5,235.17 | | | |
| | | Multiply by 12 (the number of months in a year). | | X | 12 | | | |
| | 20b. | The result is your current monthly income for the y | ear for this part of the form. | \$42 | 22,822.04 | | | |
| | 20c. | Copy the median family income for your state and | size of household from line 16c. | \$7 | 3,948.00 | | | |
| 21. | Hov | do the lines compare? | | | | | | |
| | Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, <i>The commitment period is 3 years</i> . Go to Part 4. | | | | | | | |
| | | Line 20b is more than or equal to line 20c. Unless of this form, check box 4, <i>The commitment period is</i> | | | | | | |
| Р | art 4 | : Sign Below | | | | | | |
| | By s | igning here, under penalty of perjury I declare that the | e information on this statement and in any attachments is true and | d correc | t. | | | |
| | | s/ Kevin Sterneckert | X | | | | | |
| | ŀ | Cevin Sterneckert, Debtor 1 | Signature of Debtor 2 | | | | | |
| | | Date 7/31/2020 | Date | | | | | |
| | | MM / DD / YYYY | MM / DD / YYYY | | | | | |

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

| Fill in this information to identify your case: | | | | | | | |
|---|-------------------------|---------------|--------------|--|--|--|--|
| Debtor 1 | Kevin | Sterneckert | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | E N | ACT III AT | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States Bar | nkruptcy Court for the: | WESTERN DISTR | ICT OF TEXAS | | | | |
| Case number (if known) | | | | | | | |

☐ Check if this is an amended filing

Official Form 122C-2

Chapter 13 Calculation of Your Disposable Income

04/19

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

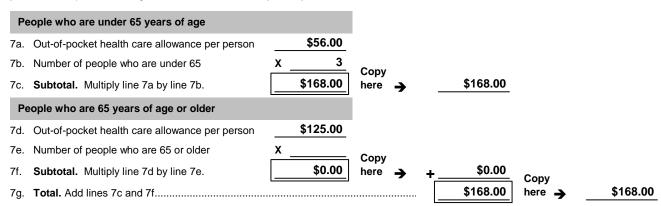
3

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. Food, clothing and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$1,433.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.



| Debtor 1 | | Kevin Sterr | neckert | Case number (if known) | | | | |
|----------|---|---|--|---------------------------------|--------------------------|---------------------------------|----------|--|
| Loc | al Sta | ındards | You must use the IRS Local Sta | indards to answer the que | stions in lines 8-15. | | | |
| | | | rom the IRS, the U.S. Trustee Pres into two parts: | ogram has divided the IF | RS Local Standard for h | ousing | | |
| | | - | s Insurance and operating exp s Mortgage or rent expenses | enses | | | | |
| the | link s | | ns in lines 8-9, use the U.S. Trus e separate instructions for this foce. | | | using | | |
| 8. | B. Housing and utilities Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. | | | | | | | |
| 9. | Hous | sing and utilitie | es Mortgage or rent expenses | : | | | | |
| | | - | ber of people you entered in line 5 of for mortgage or rent expenses. | i, fill in the dollar amount li | sted \$1,868. | 00 | | |
| | | Total average r | monthly payment for all mortgages | s and other debts secured | by | | | |
| | To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. | | | | | | | |
| | | Name of the | creditor | Average monthly payment | | | | |
| | | Select Portfo | olio Servicing, Inc | \$11,843.15 | | | | |
| | | USAA Federa | al Savings Bank | \$836.20 | | | | |
| | | | | + | | | | |
| | | 9b. Total avera | age monthly payment | \$12,679.35 Cop | £40.070 | Repeat this amount on line 33a. | | |
| | 9c. | Net mortgage of | or rent expense. | | | | | |
| | | | b (total average monthly payment) If this number is less than \$0, en | , , , | \$0. | Copy here | \$0.00 | |
| 10. | • | | e U.S. Trustee Program's division | | • | errect _ | | |
| | Expla | ain | | - | | | | |
| 11. | | al transportation 0. Go to line 1. 1. Go to line 1. 2 or more. Go | 2. | of vehicles for which you o | claim an ownership or op | erating expense. | | |
| 12. | | • | expense: Using the IRS Local States, fill in the Operating Costs that ap | | • | | \$386.00 | |

| | IXCVII | Sterneckert | Cas | e number (if known) _ | | |
|-----|--------------------------------|--|--|-----------------------|---|------------------|
| | ense for e | ership or lease expense: Using the IRS each vehicle below. You may not claim the addition, you may not claim the expense. | ne expense if you do not make a | | | |
| Veh | hicle 1 | Describe Vehicle 1: 2012 Ford Ex | pedition | | | |
| 13a | a. Ownersł | nip or leasing costs using IRS Local Stan | dard | \$521.00 | | |
| | | e monthly payment for all debts secured b | | | | |
| | Do not i | nclude costs for leased vehicles. | | | | |
| | amounts | ulate the average monthly payment here as that are contractually due to each secur u file for bankruptcy. Then divide by 60. | | | | |
| | Name | of each creditor for Vehicle 1 | Average monthly payment | | | |
| | Ford N | Notor Credit | \$209.16 | | | |
| | | | + | | | |
| | | Total average monthly payment | \$209.16 Copy | _ \$209.16 | Repeat this amount on line 33b. | |
| 13c | c. Net Veh | icle 1 ownership or lease expense. | | | Copy net Vehicle 1 expense | |
| | Subtract | | | C244 04 | | |
| | Subilaci | t line 13b from line 13a. If this number is | less than \$0, enter \$0. | \$311.84 | here → | \$311.8 |
| Veh | hicle 2 | t line 13b from line 13a. If this number is Describe Vehicle 2: | less than \$0, enter \$0. | <u>\$311.84</u> | here → | \$311.8 |
| Veh | | l | less than \$0, enter \$0. | \$311.84 | here → _ | \$311.8 |
| | hicle 2 | l | | | here → _ | \$311.8 |
| 13d | hicle 2 d. Ownerslee. Average | Describe Vehicle 2: | dard | | here → _ | \$311.8 |
| 13d | d. Ownersh | Describe Vehicle 2: nip or leasing costs using IRS Local Stante monthly payment for all debts secured by | dard | | here 🔸 - | \$311.8 |
| 13d | d. Ownersh | Describe Vehicle 2: nip or leasing costs using IRS Local Stan e monthly payment for all debts secured by r leased vehicles. | dard y Vehicle 2. Do not include Average monthly | | here 🔸 - | \$311.8 |
| 13d | d. Ownersh | Describe Vehicle 2: nip or leasing costs using IRS Local Stan e monthly payment for all debts secured by r leased vehicles. | dard y Vehicle 2. Do not include Average monthly | | Repeat this amount on line 33c. | \$311.8 |
| 13d | d. Ownersh | Describe Vehicle 2: nip or leasing costs using IRS Local Stands monthly payment for all debts secured by a leased vehicles. of each creditor for Vehicle 2 | dard | | Repeat this amount on line 33c. Copy net | \$311.8 |
| 13d | d. Ownersl e. Average costs fo | Describe Vehicle 2: nip or leasing costs using IRS Local Stands monthly payment for all debts secured by a leased vehicles. of each creditor for Vehicle 2 | dard | | Repeat this amount on line 33c. | \$311.8 <i>4</i> |

| Debto | Kevin Sterneckert | Case number (if known) | | | | | | |
|-------|---|--|------------|--|--|--|--|--|
| 15. | | you claimed 1 or more vehicles in line 11 and if you claim that you may umay fill in what you believe is the appropriate expense, but you may Public Transportation. | \$0.00 | | | | | |
| Othe | r Necessary Expenses In addition to the following IRS cate | expense deductions listed above, you are allowed your monthly expenses fo egories. | r the | | | | | |
| 16. | employment taxes, social security taxes, and Me | ally pay for federal, state and local taxes, such as income taxes, self- edicare taxes. You may include the monthly amount withheld from at to receive a tax refund, you must divide the expected refund by 12 amount that is withheld to pay for taxes. | \$5,498.00 | | | | | |
| 17. | union dues, and uniform costs. | yroll deductions that your job requires, such as retirement contributions, your job, such as voluntary 401(k) contributions or payroll savings. | \$0.00 | | | | | |
| 18. | filing together, include payments that you make | nat you pay for your own term life insurance. If two married people are for your spouse's term life insurance. our dependents, for a non-filing spouse's life insurance, or for any | \$132.88 | | | | | |
| 19. | Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. | | | | | | | |
| 20. | Education: The total monthly amount that you p as a condition for your job, or for your physically or mentally challenged de | pay for education that is either required: | \$0.00 | | | | | |
| 21. | , , , , , , | bay for childcare, such as babysitting, daycare, nursery, and preschool. | \$0.00 | | | | | |
| 22. | 2. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25. | | | | | | | |
| 23. | for you and your dependents, such as pagers, c phone service, to the extent necessary for your of income, if it is not reimbursed by your employ Do not include payments for basic home telepho | The total monthly amount that you pay for telecommunication services all waiting, caller identification, special long distance, or business cell health and welfare or that of your dependents or for the production ver. one, internet and cell phone service. Do not include self-employment official Form 122C-1, or any amount you previously deducted. | \$0.00 | | | | | |
| 24. | Add all of the expenses allowed under the IR Add lines 6 through 23. | S expense allowances. | \$8,540.72 | | | | | |
| Add | • | dditional deductions allowed by the Means Test. include any expense allowances listed in lines 6-24. | | | | | | |
| 25. | Health insurance, disability insurance, and he | ealth savings account expenses. The monthly expenses for health ngs accounts that are reasonably necessary for yourself, your | | | | | | |
| | Health insurance | \$859.78 | | | | | | |
| | Disability insurance | \$3.32 | | | | | | |
| | Health savings account | +\$0.00 | | | | | | |
| | Total | \$863.10 Copy total here | \$863.10 | | | | | |
| | Do you actually spend this total amount? | | | | | | | |
| | No. How much do you actually spend?✓ Yes | | | | | | | |
| 26. | Continued contributions to the care of house will continue to pay for the reasonable and nece member of your household or member of your ir | chold or family members. The actual monthly expenses that you issary care and support of an elderly, chronically ill, or disabled mmediate family who is unable to pay for such expenses. These unt of a qualified ABLE program. 26 U.S.C. § 529A(b). | \$0.00 | | | | | |

| Debto | or 1 Kevin Sterneckert | Case number (if known) | | |
|-------|--|--|-------|------|
| 27. | Protection against family violence. The reasonably necessary n safety of you and your family under the Family Violence Prevention By law, the court must keep the nature of these expenses confiden | and Services Act or other federal laws that apply. | \$0 | 0.00 |
| 28. | Additional home energy costs. Your home energy costs are incluon line 8. | ided in your insurance and operating expenses | | |
| | If you believe that you have home energy costs that are more than line 8, then fill in the excess amount of home energy costs. | the home energy costs included in expenses on | | |
| | You must give your case trustee documentation of your actual experimental and necessary. | enses, and you must show that the additional | | |
| 29. | Education expenses for dependent children who are younger t \$170.83* per child) that you pay for your dependent children who a public elementary or secondary school. | | \$0 | 0.00 |
| | You must give your case trustee documentation of your actual expectaimed is reasonable and necessary and not already accounted for | | | |
| | * Subject to adjustment on 4/01/22, and every 3 years after that for | cases begun on or after the date of adjustment. | | |
| 30. | Additional food and clothing expense. The monthly amount by whigher than the combined food and clothing allowances in the IRS than 5% of the food and clothing allowances in the IRS National St | National Standards. That amount cannot be more | | |
| | To find a chart showing the maximum additional allowance, go onli instructions for this form. This chart may also be available at the b | | | |
| | You must show that the additional amount claimed is reasonable a | nd necessary. | | |
| 31. | Continuing charitable contributions. The amount that you will construments to a religious or charitable organization. 11 U.S.C. § 5 | | +\$0 | 0.00 |
| | Do not include any amount more than 15% of your gross monthly in | ncome. | | |
| 32. | Add all of the additional expense deductions. Add lines 25 though 31 | | \$863 | 3.10 |

| Debto | or 1 | Kev | Kevin Sterneckert Ca | | | | | Case | Case number (if known) | | | |
|---|--|-----------|------------------------------|-----------------|--|---------------------|----------|-------------|------------------------|---------------------|-----------------|-------------|
| Ded | uction | ns for | Debt Payment | | | | | | | | | |
| 33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle | | | | | | | | | | | | |
| 00. | | | | - | nes 33a through 33 | - | moraa | ing nom | | nortgages, verno | | |
| | To calculate the total average monthly payment, add all amounts that are contrac the 60 months after you file for bankruptcy. Then divide by 60. | | | | | | | ractually | du | e to each secured | creditor in | |
| | | | | | | | | Αv | erage monthly | | | |
| | | | | | | | | | | yment | | |
| | | Mort | gages on your | home | | | | | | | | |
| | 33a. | Copy | / line 9b here | | | | | ···· | → | \$12,679.35 | | |
| | | | ns on your first | | | | | | | \$000.40 | | |
| | 33b. | | | | | | | | | \$209.16 | | |
| | 33c. | Copy | / line 13e here | | | | | ·····- | → | \$0.00 | | |
| | 33d. | | other secured de | ebts: | | | | | | | | |
| | | | ach creditor for red debt | hat | | paymen le taxes | | | | | | |
| | | | | | secures the debt | | insura | | • | | | |
| | Char | lesw | orth Pool Mai | ntenance | 10620 Bridlewoo | od Trail, I | Boe 5 | Z No | | \$41.74 | | |
| | | | | | | , | | Yes | | | | |
| | | | | | | | [| □ No | | | | |
| | | | | | | | | Yes | | | | |
| | - | | | | | | [| □ No Tes | + | | | |
| | | | | | | | L | _ 100 | [| | Copy total | |
| | 33e. | Total | average month | ly payment. A | Add lines 33a throug | h 33d | | | [| \$12,930.25 | here → | \$12,930.25 |
| 34. | | - | | | secured by your p | - | sidence | e, a vehi | cle | , or other proper | ty | |
| | neces | ssary | tor your suppo | rt or the sup | port of your depend | lents? | | | | | | |
| | ш. | | Go to line 35. | | _ | | | | | | | |
| | ☑ ` | | • | • | ust pay to a creditor, called the cure amou | | | | | | • | |
| Man | 41 | | | | | | | , | | | | |
| Nan | ne of tl | ne cre | editor | Identify pro | | Total cur amount | е | | | Monthly cure amount | | |
| Cal | 4 D - | - utf - 1 | ia Camalainan I | 40000 Duid | llawaad Taail Da | 604440 | 0.70 | . 60 – | | ¢2 500 00 | | |
| Seid | ect Po | orttoi | io Servicing, i | 10620 Brid | llewood Trail, Bo | \$214,18 | 30.78 | ÷ 60 = | | \$3,569.68 | | |
| USA | AA Fe | deral | Savings Ban | 10620 Brid | llewood Trail, Bo | \$23,89 | 7.60 | ÷ 60 = | | \$398.29 | | |
| | | | | | | | | . 00 | | | | |
| | | | | | | | | ÷ 60 = | + | | | |
| | | | | | | | | Total | | \$3,967.97 | Copy total here | \$3,967.97 |
| 25 | Do w | | o ony priority o | laima auah | as a priority tax, ch | ild cunno | rt or | | l | | | |
| 33. | alimo | | nat are past due | | ng date of your bar | | | | | | | |
| | | _ | Go to line 36. | | | | | | | | | |
| | ш. | Yes. | Fill in the total a | | of these priority claim | | | | | | | |
| | | | current or ongoi | ng priority cla | ims, such as those y | ou listed i | n line 1 | 9. | | | | |
| | | | Total amount of | all past-due | oriority claims | | | | | \$3,800.00 | ÷ 60 = | \$63.33 |
| | | | | | | | | | | | | |

| Debto | Kevin Sterneckert | Case | e number (if known) | | |
|-------|--|--|---------------------|-----------------|-------------|
| 36. | Projected monthly Chapter 13 plan payment | | \$11,925.00 | | |
| | Current multiplier for your district as stated on the list is Office of the United States Courts (for districts in Alaba by the Executive Office for United States Trustees (for | ama and North Carolina) or | | | |
| | To find a list of district multipliers that includes your dis specified in the separate instructions for this form. Thi at the bankruptcy clerk's office. | | x9.3 % | % | |
| | Average monthly administrative expense | | \$1,109.03 | Copy total here | \$1,109.03 |
| 37. | Add all of the deductions for debt payment. Add lines 33g through 36. | | | | \$18,070.58 |
| Tota | l Deductions from Income | | | | |
| 38. | Add all of the allowed deductions. | | | | |
| | Copy line 24, All of the expenses allowed under IRS e | xpense allowances | \$8,540.72 | | |
| | Copy line 32, All of the additional expense deductions | | \$863.10 | | |
| | Copy line 37, All of the deductions for debt payment | | + \$18,070.58 | | |
| | Total deductions | | \$27,474.40 | Copy total here | \$27,474.40 |
| Part | Determine Your Disposable Income Copy your total current monthly income from line 1 | • | b)(2) | | |
| | Statement of Your Current Monthly Income and Cal | | d | | \$35,235.17 |
| | Fill in any reasonably necessary income you received. The monthly average of any child support payments, for disability payments for a dependent child, reported in Figure 4 you received in accordance with applicable nonbankrular reasonably necessary to be expended for such child. | oster care payments, or Part 1 of Form 122C-1, that | ildren. | | |
| | Fill in all qualified retirement deductions. The monty your employer withheld from wages as contributions fo plans, as specified in 11 U.S.C. § 541(b)(7) plus all recfrom retirement plans, as specified in 11 U.S.C. § 362(| r qualified retirement quired repayments of loans | \$0.00 | | |
| 42. | Total of all deductions allowed under 11 U.S.C. § 70 Copy line 38 here | | \$27,474.40 | | |
| 43. | Deduction for special circumstances. If special circ expenses and you have no reasonable alternative, descircumstances and their expenses. You must give you explanation of the special circumstances and documer | | | | |
| | Describe the special circumstances | Amount of expense | | | |
| | | | | | |
| | | | | | |
| | | _+ <u></u> | | | |
| | Tota | \$0.00 Copy | + \$0.00 | | |

| Debto | r1 <u>I</u> | Kevin Ste | rneckert | | | | Case n | umber (if kno | wn) | | | | |
|-------|-------------------|--------------------------------------|-----------------------------|---|--|-------------------------------------|----------------------------|--------------------------------|----------------------|--------------------|-------------------------|-----------------|-------|
| 44. | Total a | djustments | s. Add lines | 40 through 43 | | | → | \$27,474. | 40 | opy ere | > - | \$27,47 | 74.40 |
| 45. | Calcula | ate your m | onthly dispo | sable income u | nder § 1325(b)(2 | 2). Subtract I | ine 44 from | line 39. | | | | \$7,70 | 30.77 |
| Par | t 3: | Change | in Income | or Expense | s | | | | | | | | |
| | virtually informa | certain to ation below. In the secon | change after For example | the date you file e, if the wages re | e in Form 122C-1 d your bankrupto eported increased ges increased, fi | cy petition and d after you file | I during the ed your petit | time your cas ion, check 12 | e will be 2C-1 in | e open the fire | , fill in t st colur | he nn, enter | |
| | Form | Lin | e Reason | for change | | | Date of ch | nange | Increa decrea | | Amo | ount of ch | ange |
| | ш | 22C-1 22C-2 — | | | | | | | ш_ | crease ecreas | | | |
| | ш | 22C-1 22C-2 — | | | | | | | ш_ | crease ecreas | | | |
| | | 22C-1 22C-2 — | | | | | | | □ Inc | crease ecreas | : | | |
| | ш | 22C-1 | | | | | | | ш | crease | | | |
| | | 22C-2 — | | | | | | | Пре | ecreas | е | | |
| Par | t 4: | Sign Be | low | | | | | | | | | | |
| | | | | of perjury you de | eclare that the inf | | his stateme | nt and in any | attachm | nents is | s true a | nd correc | t. |
| | <i>-</i> | Kevin Ste in Sterneck | ert, Debtor 1 | | | X | gnature of [| Debtor 2 | | | | | _ |
| | Date | 9 7/31/20 MM / DD | | | | Da | ate | D / YYYY | | _ | | | |